

**CRADDOCKSTOWN SCHOOL**

**APPLICATION FORM FOR ADMISSION - 2024/2025**

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| **This is an Application Form for admission and does not constitute an offer of a place, implied or otherwise*.*** |
| Completed applications will be accepted from:  | 22nd April 2024 |
| The closing date for receipt of applications is: | 10th May 2024 |

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| Please complete all sections of the following application using BLOCK CAPITALS |
| SECTION 1 – CHILD DETAILS |
| Details of the young person for whom this application is being made. |
| First Name: |  |
| Middle Name: |  |
| Surname: |  |
| Child’s Address: |  |
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| Eircode: |  | **PPSN:** |  |  |  |  |  |  |  |  |

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| SECTION 2 – DETAILS OF PARENT/GUARDIAN |
| This information is sought for the purposes of making contact about this application. If more than one name is given but the address is the same, one letter will issue addressed to both individuals. |
|  | **Parent / Guardian 1** | **Parent / Guardian 2** |
| Prefix:(Mr/ Ms/Ms *etc*.) |  |  |
| First Name: |  |  |
| Surname: |  |  |
| Address: |  |  |
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| Eircode: |  |  |
| Telephone no. |  |  |
| Email address: |  |  |
| Relationship to child: |  |  |

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| **SECTION 3 – STUDENT CODE OF BEHAVIOUR** |
| Please confirm that the Student Code of Behaviour is acceptable to you as a parent/guardian, and you shall make all reasonable efforts to ensure compliance with same by the child if s/he secures a place in the school. Please note that the Code of Behaviour is available at <https://kwetb.ie/schools/craddockstown-school> or by email from craddockstownschool@kwetb.ie (Both parents/guardians should complete this section where both are making the application.) |
| I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ confirm that the Code of Behaviour for the school is acceptable to me as the child’s parent/guardian and I shall make all reasonable efforts to ensure compliance by the child if s/he secures a place in the school.I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ confirm that the Code of Behaviour for the school is acceptable to me as the child’s parent/guardian and I shall make all reasonable efforts to ensure compliance by the child if s/he secures a place in the school. |

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| **SECTION 4 – SELECTION CRITERIA FOR ADMISSION IN THE EVENT OF OVERSUBSCRIPTION** |
| This information will assist in determining whether the child meets the admission requirements. The list of questions is in the order of priority as per the Admission Policy for Craddockstown School. |
| Is your child currently without an offer of a place in a special school for the school academic year 2024/2025? | * Yes
* No
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| **SECTION 5 - SELECTION CRITERIA FOR ADMISSION IN THE EVENT OF OVERSUBSCRIPTION** |
| This information will assist in determining whether the child meets the admission requirements. The list of questions is in the order of priority as per the Admission Policy for Craddockstown School. |
| 1. **Please confirm the child’s address for the purpose of determining whether s/he resides in County Kildare.** Please note that recent proof of address will be required in support of this. (Only registered utility bills for the address, dated within the last three months and in the name of the parent(s)/guardian(s) will be accepted.)
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| **Address:** |  |
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| **IMPORTANT INFORMATION:****Please ensure you return the following documents to the school to complete the application:*** Fully completed Admission Application Form signed by Parent(s)/Guardian(s)
* An original birth-certificate (together with a copy).
* Recent proof of address such as current utility bill (gas, electricity or telephone or mobile phone bill), or current car or home insurance policy that shows your address or a document issued by a government department that shows your address, dated within the last three months and in the name of the parent(s)/guardian(s) will be accepted.
* Recent psychological assessment reports or a report which has been prepared within the 24 months immediately preceding the child’s application to the school confirming that the child has a diagnosis of autism **and** complex learning needs **or** complex learning needs, making a clear recommendation which states that the student requires a special school setting and the reasons why this is the case.

**All of the information that you provide in this Application Form is taken in good faith. If it is found that any of the information is incorrect, misleading or incomplete, the application may be rendered invalid.****Please understand that it is your responsibility to inform the school of any change in contact information or circumstances relating to this application.****For information regarding how your data is processed by the school and KWETB, please see the document DATA PROTECTION AND THE ADMISSIONS PROCESS FOR CRADDOCKSTOWN SCHOOL.****Please sign below to confirm that the contents of this form are correct and that you have read and understood the associated data protection information.** |

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| **Signatures** |
| **Signed:** |  | **Signed:** |  |
|  | *(Parent / Guardian 1)* |  | *(Parent / Guardian 2)* |
|  |  |  |  |  |  |
| **Date:** |  | **Date:** |  |
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| Please note that it is not necessary for both parents/guardians to sign this application form, but the person(s) who apply to enrol a child must be the child’s legal guardian(s). Where a child has two legal guardians and application is made on behalf of a child by one of those guardians, the signature of that guardian confirms that the application is made with the permission of both guardians. |

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| **All Application Forms and accompanying documentation should be sent to:** | **For office use only** |
| FAO – Single ManagerCraddockstown SchoolAras Chill Dara,Devoy Park,Naas, Co. KildareW91 X77F | Date received: \_\_\_\_/\_\_\_\_/\_\_\_\_\_\_\_\_School/ETB Stamp: |

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| **OFFICE USE ONLY** |
| **Date Application Received:**  |
| **Checked by:** |
| **Date entered on School Database:** |
| **Entered by:** |