



St. Flannan's College,
Clare Road,
Ennis,
Co. Clare

St. Flannan's College

Killaloe Diocesan College
A Catholic Voluntary Secondary School
Application Form
First Year 2020/2021

Please attach a
passport photo
here

Completed 1st Year Application Forms must be returned by
January 24th 2020

Please complete this form in BLOCK CAPITALS

Student's Personal Details

(* indicates an item required by the Department of Education & Skills for their records)

* First name/s:		* Surname:		*Male <input type="checkbox"/>
* Address:				*Female <input type="checkbox"/>
* Date of Birth: day/month/year / /	* Student's PPSN: <input type="text"/> <small>If you don't know your son's/daughter's PPSN, you can get it from your Social Welfare Local Office or by phone from 01- 704 3281.</small>		*Nationality:	
		Medical Card Holder: Yes <input type="checkbox"/> No <input type="checkbox"/>		
*Present Primary School:		School Roll No: <input type="text"/>		
Name of Mother/Guardian: _____				
* Maiden name of mother: _____				
Address if different from student above: _____				
Occupation: _____				
Mobile no: _____		Work no: _____		Home: _____
Email address: _____				
Name of Father/Guardian: _____				
Address if different from student above: _____				
Occupation: _____				
Mobile no: _____		Work no: _____		Home: _____
Email address : _____				

Siblings currently in the school (if any)	Name/s	Year Group - 1 st , 2 nd , 3 rd , TY, 5 th or 6 th .
Name(s) of sister(s)/brother(s) currently in St Flannan's College		

In accordance with the Department of Education and Skills Guidelines I give permission for St Flannan's College to share information on this form with the DES and for both the school and the DES to retain personal information about my child for the purposes outlined in DES Circular 0047/2010 (a copy of which is available at www.education.ie or from the school office).

Please tick the box to indicate your permission.

Checklist:

I/we have read the St. Flannan's College **Code of Behavior, Admissions Policy** and **Mission Statement** included or at www.stflannanscollege.ie

I/we have included a copy of a valid Birth Certificate.

I/ we have included an original passport photo.

I/ we confirm that this student is currently in 6th class in primary school and will complete 6th Class in June 2020

I/ we confirm that all information included in and with this application form is true and accurate

*Applications will **NOT** be accepted by e mail.*

Correspondence relating to this application will be sent to the address of the student

Note completion of this application does not guarantee admission. All of the information that you provide on this application will be treated as confidential.

The child's name submitted on this application form is the name that will be used on the school database if a place is offered to your child.

In the event that your child is offered a place in first year and where more than one address is given academic reports will automatically be sent to both addresses.

Please return this completed application form with a *copy* of a valid *Birth Certificate* to the following address.

**Admissions,
St. Flannan's College,
Clare Road,
Ennis,
Co. Clare.**

Signature/s of Parent/s or Guardian/s: _____ Date: _____

_____ Date: _____

Signature of applicant: _____ Date: _____

Office use only