

Application Number: **Scoil Chonglais Post-Primary School**

Baltinglass, Co. Wicklow

(t) 059 648 1449 (e) info@scoilchonglais.ie (w) www.scoilchonglais.ie Principal: Patrick Maguire Deputy Principal: Emma Fox



APPLICATION FORM FOR STUDENT ENROLMENT FOR ACADEMIC YEAR 2025-2026.

PART 1 PERSONAL DETAILS OF CHILD (Rec	quired for school	enrolment and parental contact purposes)
First Name	Surname	Date of Birth
Student's PPSN		_ Year Group (e.g. First Year etc.)
Gender		Country of Birth
Birth Certificate First Name		Birth Certificate Surname
Birth Cert attached? (Please circle)	Yes	No
Home Address of student		
		Eircode
Nationality		No: of children in family
Mother's Maiden Name		Position of this child in family
PARENTAL/GUARDIAN DETA	-	PARENTAL/GUARDIAN DETAILS First name
Surname		Surname
Maiden Name (if applicable)		Maiden Name (if applicable)
Relationship to Child		Relationship to Child
Occupation (optional)		Occupation (optional)
Address		Address
Phone No. (Home)		Phone No. (Home)
Phone No (Work)		Phone No (Work)
Phone No (Mobile)		Phone No (Mobile)
Email Address		Email Address
Other emergency Name and Contact N	umber	
Name		Phone No
Relationship to Child		

	er arrangements in place governing access to, o	-	
If yes, please provide details. (P	Please circle).	Yes	No
Does the student have any broth	ers or sisters already in this school (please circl	e) Yes	No
f yes please indicate names and th	ne year they are currently in:		
Name	Year		_
Name	Year		_
Does the student have any broth please circle)	ers or sisters who previously attended this scho	ol Yes	No
If yes please indicate names and th	ne year they attended:		
Name	Year		_
Name	Year		
	(Note: We may contact the school in connection with you	ur child's enro	lment)
PART 3 CURRENT SCHOOL DETAILS School being attended at present: Address:	(Note: We may contact the school in connection with you	ur child's enro	lment)
School being attended at present:		ır child's enro	lment)
School being attended at present:	School Roll Number::		
School being attended at present:	School Roll Number::		
School being attended at present: Address:	School Roll Number:: Telephone Number: Class Group:		
School being attended at present: Address: Other School (s) attended and date	School Roll Number:: Telephone Number: Class Group: Principal's Name: es (if relevant) the above named student give permission to the above		

English as an Additional Language (EAL) Information

Has the student received EAL support?	(Please circle)	Yes	No
If yes, for how many years:			

PART 4 HEALTH RECORD			
Doctor's Name:	Telephone Numbe	er:	
Does the student have any specific, on-going health problems? (e.g. hearing, eyesight, heart issues, diabetes, asthma, epilepsy, on-going prescribed medication etc.) (Please circle)	Yes	Νο	
If yes, please give detail below and outline the procedures to be for	llowed (use a separa	ate sheet if necessary):	
Does the student have any allergies you are aware of? (Please cir	cle) Yes	No	
If yes, please give details below and outline the procedures to be f			
Note: Please advise the School Authority should any of the above	details change in the	e future.	
PART 5 ADDITIONAL EDUCATIONAL NEEDS (AEN)			
Please Note:			
Irish is a compulsory subject for all students. Exempt in exceptional cases as per Department of Education C			
Is the student currently studying Irish? (Please circle)		Yes	No
If you answered "No" please indicate the reason and provid our files.	e the official letter	of exemption from the study of	Irish for
Has the student ever received teaching support in their curr If answered "Yes" please give details of subjects and the su			No
Has the student an educational/psychological or other relev If yes, please provide a copy of the report for our files.	ant assessment?	(Please circle) Yes	No
PRE-ENTRY ASSESSMENTS It is accepted practice that all students transferring from primary in Assessment Tests. These tests assess a students' knowledge a reasoning. Results will indicate an individual's underlying abilities A low score in a particular area or areas may indicate that a stud Support Department. A student's results do not directly determine ability/non-streamed. In Scoil Chonglais these assessments norm February/early March. Parental and Student consent are a prere- below.	nd skills in: literacy, s in these areas and ent will need some a e his/her class grou nally take place dur	numeracy, non-verbal, and abstra d how that can be built upon. additional support from the school's uping as all First Year classes are n ing the months prior to entry, in lat	s Learning nixed e
Student's Signature: F	Parent's Signature	:	
Print name:F	Print name:		

PART 6 JUNIOR CYCLE SUBJECT CHOICE (Only to be completed if doing Junior Cycle)

Section 1: Modern European Languages: French, German, or Spanish

Students at Scoil Chonglais study at least one European Language for the Junior Cycle. The languages on offer are French and German. In the table below, please indicate your preferred language option.

French	
German	
Spanish	
No Preference	

Section 2: Elective Examination Subjects (Three additional subjects)

In addition to all the Mandatory Examination Subjects, students must take a further **three** subjects to complete their programme for the Junior Cycle. In order to allow preparation of our school timetable students are required to select **three** elective subjects. Please choose your subjects from the list below by listing 7 subjects in order of preference.

It is very important that you place your most desirable subject (Number 1) first and then work down to your seventh subject choice (Number 7). Enter the numbers 1 to 7 in the column marked 'Number.'

Please take note of your preferences for your own records.

Subject	Number
A. Art, Craft and Design	
B. Business Studies	
C. Home Economics	
D. Materials Technology (Wood)	
E. Engineering	
F. Music	
G. Technical Graphics	

Please note that while every effort is made to provide students with their preferred subjects, this may not be possible in every instance. In addition, where there is insufficient demand for a given subject, School Management reserves the right to withdraw a subject(s) from the school curriculum.

Student's Signature:	Date:
Student Name (please print):	
Parent(s)/Guardian(s) Signature:	Date:
PART 7 DECLARATION & GDPR DATA PROTECTION CONSENT	
I declare that the above information is true. I consent to Scoil C I consent to being contacted by Scoil Chonglais in relation to m Scoil Chonglais in their promotional materials. I agree to abide	y child's education. I consent to my child's image being used by

Student's Signature:

Parent(s)/Guardian(s) Signature: _____

Date: _____

Dear Parent/Guardian,

In addition to the core academic subjects of Irish, English and Maths, students must take a further **four** subjects from those available at Senior Level. In determining subject groupings for Senior Cycle, every effort is made to meet students' needs.

The process requires each student to select 6 subjects from the "menu" **in genuine order of preference**. Where possible each student will be given their first four choices:-

Menu: Design & Communication Graphics (Technical Drawing), Construction Studies, Engineering, Music, Business, Accounting, Geography, History, Biology, Chemistry, Physics, French, German, Art and Home Economics.

Choose 6 subjects, in order of preference, from the above list. It is very important that you place your most desirable subject first and then work down to number 6, your least desirable. (You may use the back of the sheet for rough work).

1.	 	
2.	 	
3.	 	
4.	 	
5.	 	
6.		

The School Management reserves the right to withdraw a subject(s) from the above "menu" should there be insufficient demand.

Student's Signature:	Date:
Parent(s)/Guardian(s) Signature:	Date:

PART 9 DECLARATION & GDPR DATA PROTECTION CONSENT

I declare that the above information is true. I consent to Scoil Chonglais passing my information onto relevant third parties. I consent to being contacted by Scoil Chonglais in relation to my child's education. I consent to my child's image being used by Scoil Chonglais in their promotional materials. I agree to abide by the Scoil Chonglais Code of Behaviour.

Student's Signature:

Parent(s)/Guardian(s) Signature: _____

Date: _____

Date: _____