



Application for Admission to Special Class for students with Autism
Senior Infants – 6th Class
School Year 20__/20__

Application for Admission to _____ Class

Please note that this form is for application purposes only. The information provided will be used to allocate ASD places in accordance with the School's Admission Policy/Annual Admission Notice (www.stpatricksdelasalle.com). Please complete all sections of the form.

General Information on Child

First Name:	Surname:	
PPS Number:	DOB:	Gender:

Home Address:

Eircode:

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Siblings in the school: Yes No (Please tick)

Name(s) of sibling(s): _____ Sibling's class: _____

Siblings in St. John of God school: Yes No (Please tick)

Name(s) of sibling(s): _____ Sibling's class: _____

General Information on Parent(s)/Guardian(s)

Parent/Guardian	Parent/Guardian
Name:	Name:
Address (if different from child's):	Address (if different from child's):

Coote's Lane, Kilkenny, R95DX80

Laura Brennan - Acting Principal

056 - 776 1081

office@stpatricksdelasalle.com
 principal@stpatricksdelasalle.com

Reg. Charity No. 20206147

School Roll No. 17854D





Mobile No:		Mobile No:	
Present Parish: (Please tick)			
St. Patrick's <input type="checkbox"/>		St. John's <input type="checkbox"/>	
St. Mary's <input type="checkbox"/>		St. Canice's <input type="checkbox"/>	
Other <input type="checkbox"/>			
Previous School (if any)?	Name:	Address:	
Has your child been assessed for A.S.D?	Date: Psychologist:	Diagnosis (including category):	
Has your child any special needs, behaviour, health or otherwise?			
Any other relevant information:			
Reports:	Please attach all relevant reports		

This Application *MUST* be accompanied by your child's *ORIGINAL* birth certificate.
The school will make a copy of the document(s) submitted and will return all of the original documents.

<u>Declaration:</u>	
I/We being the Parent(s)/Guardian(s) of the applicant do hereby confirm that the above information is true and accurate and I/we consent to its use as described.	
Parent/Guardian's Signature:	Parent/Guardian's Signature:
Date:	Date:

Office Use only:

*Date	D	D	M	M	Y	Y
Application Received						

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Data Privacy Statement

The information provided on this form will be used by St. Patrick's de la Salle B.N.S to apply the selection criteria for enrolment in Junior Infants, and to allocate school places in accordance with the School's Admission Policy and the School's Annual Admission Notice.


Where a pupil is admitted to the school, the information will be retained on the pupil's file. On acceptance of an offer of admission, this information will be entered in the School Administration System Aladdin and will be uploaded to the Primary Online Database. The Primary Online Database (POD) is a nationwide individualised database of primary school pupils, hosted by the Department of Education and Skills.

In the event of oversubscription, St. Patrick's de la Salle B.N.S will apply the criteria listed in Section 6. Oversubscription on the school admission policy.


Where a child's name is placed on a waiting list, and the child is not admitted to the school, the information provided on this form will be retained for the duration of the school year and will be securely destroyed thereafter.


Section 66(6) of the Education (Admission to Schools) Act 2018 allows for the sharing of certain information between schools in order to facilitate the efficient admission of students. The information which may be provided to a patron or another Board of Management for this purpose may include all or any of the following:

- (i) the date on which an application for admission was received by the school;
- (ii) the date on which an offer of admission was made by the school;
- (iii) the date on which an offer of admission was accepted by an applicant;
- (iv) a student's personal details including his or her name, address, date of birth and personal public service number (within the meaning of section 262 of the Social Welfare Consolidation Act 2005).

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