Loreto Secondary School Letterkenny

Application for Enrolment to First Year 2027-2028 FORM A

For Office Use Only	
Application received by:	
Date of receipt of Application Form:	
Birth Certificate Supplied and Checked:	Yes ☐ No ☐

This application should be completed by the parent(s)/guardian(s) of sixth class only.
Please refer to our Admission's Notice and Admissions Policy which is available on the school's website.
Completion of this application does not guarantee admission.

Please ensure you return the following documents to the school to complete the application:

☐ An original long birth-certificate (together with a copy)

Section 1- Student Details

Please complete all sections below:

First Name(s): (As on Birth Certificate)	Date of Birth:
Surname:	PPS No:
Preferred name: (Usually called)	Country of Birth:
Address:	Nationality:
Eircode:	First Language:

Section 2- Education History

Primary School:
Address:
School Roll No:

Section 3-Parent/Guardian contact details (Please use BLOCK LETTERS to complete)

	Parent/Guardian 1	Parent/Guardian 2
Prefix: (e.g. Mr. /Mrs. Ms. etc.)		
First Name:		
Surname:		
Address:		
Eircode:		
Landline No:		
Mobile No:		
Email:		
Relationship to student:		

Please indicate below which parent/guardian should receive notifications from the school system?

Parent/Guardian 1 ☐ Parent/Guardian 2 ☐ Both ☐

Nominated contact person in case of emergency if neither parent/guardian is available:

Name:	Landline No:
	Mobile No:
Relationship to student:	
Address:	

Section 4: Application to Special Class

Parent(s)/Guardian(s) **must** notify the NCSE prior to making an application for admission to a special class

Do you wish to apply to have your daughter enrolled in the special class for autism — Yes ☐ No ☐

The following documentation must be provided in support of an application for enrolment in the special class for autism:

Professional report(s) outlining:
Diagnosis of Autism: DSM IV/V or ICD 10/11
(psychologist, psychiatrist, multidisciplinary report) — Yes ☐ No ☐

AND

A demonstration of the understanding of complexity of the child's overall level of need/s evidenced in the professional reports — Yes ☐ No ☐

AND

Given the severity or complexity of the child's support needs, a clear professional recommendation as to what educational placement type would be most appropriate to best meet the child's needs, along with the rationale for same — Yes ☐ No ☐

AND

A letter from the NCSE confirming that the child is known to them and that the child has the required diagnosis and recommendation for a special class for autism. — Yes ☐ No ☐

Section 5- Required in the event of oversubscription in accordance with the school's Admission Policy

A. Name of student's sisters who are **CURRENTLY** attending Loreto Secondary School, Letterkenny.

Name:	Year Group:
Name:	Year Group:

B.Name of student's sisters who **PREVIOUSLY** attended Loreto Secondary School, Letterkenny

Name:	Years Attended:
Name:	Years Attended:

C. If the student is a daughter of a current member of staff of Loreto Secondary School

Name of Staff Member:

D. If the student is a daughter of eligible past staff member of Loreto Secondary School

Name of Staff Member:

E. Is the student's Mother/Guardian a past student of the school?	Yes ☐ No ☐

If **YES**, please provide mother's maiden name and the years in which she attended Loreto Secondary School, Letterkenny.

Maiden Name:	Year of Leaving Certificate Completion at Loreto

F. Special Class for students with Autism

If your daughter is not allocated a place in this class, would you like her to be offered a place in a mainstream class?

Yes ☐ No ☐

Please note that students in the mainstream class only will not have access to the level of support attached to students enrolled in the special class.

Section 6-Data Protection

Please tick and sign below:

6.1	**Data Protection:** I consent to Loreto Secondary School, Letterkenny retaining this Data in accordance with the school's Data Protection Policy (available on the school website).	
6.2	I have read the **Code of Behaviour** which is available on the school website. I accept that my daughter must at all times abide by the Code of Behaviour and any breach of the Code of Behaviour by the enrolled student may result in sanctions.	
6.3	I give my consent for a copy of my daughter's records from her previous school to be given to Loreto Secondary School, Letterkenny	
6.4	I consent to the sharing of educational assessment reports and relevant information about my daughter's specific educational needs with relevant personnel.	
6.5	I give my consent for my daughter's photograph and/or digital image to be taken and used by Loreto Secondary School, Letterkenny for school-related purposes. This includes use in •VSware and Loreto Letterkenny School App •School website, brochures, yearbooks, newsletters and school related media I understand that I can request the removal of any image at any time by contacting the school principal.	

Signature Parent 1/ Guardian 1:
Signature Parent 2/ Guardian 2:
Signature Student:
Date: