



APPLICATION FORM FOR ADMISSION – 2025/2026

This is an application form for admission and does not constitute an offer of a place, implied or otherwise. Use of the word 'student' throughout this Application Form does not imply that the person on whose behalf this application is being made is regarded as having been accepted as a student of Kennedy College.

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|--|----------|
| Completed applications will be accepted after: | 14-10-24 |
| The closing date for receipt of applications is: | 8-11-24 |

| All Application Forms and accompanying documentation should be sent to: | For office use only |
|---|--|
| Kennedy College New Ross Co. Wexford, Y34 YW08 | Date received: ____/____/_____ School Stamp: |

Please complete all sections of the following application using BLOCK CAPITALS

SECTION 1 - PROSPECTIVE STUDENT DETAILS

Details of the young person for whom this application is being made.

| | | | | | | | | | |
|-------------------------|--|--|---|--|--|---|--|--|--|
| First Name: | | | | | | | | | |
| Middle Name: | | | | | | | | | |
| Surname: | | | | | | | | | |
| Student Address: | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| Eircode: | | | | | | | | | |
| PPSN: | | | | | | | | | |
| Date of Birth: | | | / | | | / | | | |

SECTION 2 – DETAILS OF PARENT/GUARDIAN

The 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, only one letter will issue and will be addressed to both individuals.

| | Parent / Legal Guardian 1 | Parent / Legal Guardian 2 |
|--|---------------------------|---------------------------|
| Prefix: (e.g. Mr. / Ms. / Ms. etc.) | | |
| First Name: | | |
| Surname: | | |
| Address: | | |
| | | |
| | | |
| | | |
| | | |
| Eircode: | | |
| Telephone no. | | |
| Email address: | | |
| Relationship to student: | | |
| Are you a legal guardian for this student? | | |

SECTION 3 – STUDENT CODE OF BEHAVIOUR

Please confirm that the Student Code of Behaviour is acceptable to you as a parent/guardian and that you shall make all reasonable efforts to ensure compliance of same by the student if s/he secures a place in the school. Please note that the Code of Behaviour can be found at www.kennedycollege.ie or from the school office.

I _____ confirm that the Code of Behaviour for the school is acceptable to me as the student's parent/guardian and I shall make all reasonable efforts to ensure compliance by the student if s/he secures a place in the school.

I also confirm that the student poses no risk to the health and safety of staff or other students nor poses a significant risk to the rights of other students to appropriate education and has not done so in the past.

SECTION 4 – SELECTION CRITERIA FOR ADMISSION IN THE EVENT OF OVERSUBSCRIPTION

This information will assist in determining whether the student meets the admission requirements in accordance with the order of priority as set out in the applicable section of Part B of the Admission Policy for Kennedy College.

A. If the student currently has any siblings in this school, please indicate their names and current Year of study.

| | |
|--------------------|--|
| (i) Name: | |
| Year: | |
| (ii) Name: | |
| Year: | |
| (iii) Name: | |
| Year: | |
| (iv) Name: | |
| Year: | |

B. Please provide details of the primary school attended by the student.

| | |
|------------------------|--|
| School name: | |
| School address: | |
| | |
| | |

| C. If the student has previously had any siblings in this school, please indicate their names and years of attendance. | |
|--|--|
| (i) Name: | |
| Year(s): | |
| (ii) Name: | |
| Year(s): | |

| SECTION 5 – SPECIAL CLASS | |
|--|--|
| <p><i>The special class in Kennedy College teaches students who have the following special educational need: Autism Spectrum Disorder</i></p> <p><i>Please ONLY complete if you are applying for the special class.</i></p> | |
| <p>Please tick the box below if you are applying to the special class in Kennedy College:</p> <p>I confirm that I am making an application for my son/daughter to enrol in the special class in Kennedy College: <input type="checkbox"/></p> | |
| <p>Where the student is seeking a place in the special class, please provide details of the special educational needs of the student, including an Educational/Clinical Psychologist’s report.</p> <p>I give Kennedy College consent to share information contained in this application and relevant reports with the National Council for Special Education. <input type="checkbox"/></p> | |

IMPORTANT INFORMATION:

- 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.
- I understand that the offer of a place in the Special Class is subject to the approval of the NCSE.
- For information regarding how your data is processed by the school and Waterford and Wexford Education and Training Board (WWETB), please see overleaf.
- Please sign below to demonstrate that you have read and understood this information.

***NOTE:** Should the student receive a place in Kennedy College, there is no guarantee that the student will be assigned his/her selected subject choice due to resource issues and/or restrictions on the numbers of students per class.*

Parent / Guardian 1

Date

Parent / Guardian 2

Date

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

DATA PROTECTION

The Board of Management of Kennedy College is a committee of WWETB, Ardavan Business Park, Ardavan, Co. Wexford Y35 P9EA, which is a data controller under the General Data Protection Regulations and the Data Protection Acts 1988 - 2018. The Data Protection Officer for WWETB is Ms Geraldine O’Gorman and can be contacted at dataprotectionofficer@wwetb.ie.

The personal data supplied on this Application Form and the accompanying documentation sought is required for the purpose of:

- Verification of identity and date of birth;
- Verification and assessment of admission criteria;
- Allocation of teachers and resources to the school; and
- School administration,

all of which are tasks carried out pursuant to various statutory duties to which WWETB is subject.

Failure to provide the requested information may result in the application being deemed invalid and an offer of a place may not be made.

The personal data disclosed in, or as part of, this Application Form may be communicated internally within WWETB and externally with the NCSE and/or NEPS for the purpose of determining the applicability of the selection criteria, and possibly with the patron or board of management of other schools, and/or the Department of Education, in order to facilitate the efficient admission of students, pursuant to section 66(6) of the Education Act 1998 as inserted by section 9 of the (Admissions to Schools) Act 2018. It may also be shared with Tusla Education Support Services for the purpose of assisting the student with education and training opportunities, in line with section 28 of the Education (Welfare) Act 2000.

The personal data provided in this Application Form will be kept for 7 years from the date on which the student turns 18 years of age unless there is a statutory requirement to retain some or all elements of the data for a further period or indefinitely, in line with WWETB’s Data Retention Policy, which can be found at www.waterfordwexford.etb.ie/wp-content/uploads/sites/24/2014/12/Records-Management-Policy.pdf.

A copy of the full WWETB Data Protection Policy is available at www.waterfordwexford.etb.ie/information-compliance/wwetb-policies/ or from the school office.

Any person who provides personal data through this Application Form has a right to request access to that data. S/he also has a right to request the changing of any information if it is factually incorrect. A request for erasure of the data can also be made by or on behalf of the data subject but this will only be acceded to where the data is no longer necessary for the purpose for which it was collected and where WWETB does not have a legal basis for retaining it.

If you as a data subject have any complaints regarding the processing of your personal data, you have the right to lodge a complaint with the Data Protection Commission.