

GOREY HILL SCHOOL APPLICATION FORM FOR ADMISSION - 2024/2025



This is an Application Form for admission and does not constitute an offer of a place, implied or otherwise.		
Completed applications will be accepted from:	[ONE WEEK AFTER NOTICE PUBLICATION]	
The closing date for receipt of applications is:	[3 WEEKS FROM DATE APPLICATION OPENS]	

Late applications will be considered after the dates set out above in accordance with the admissions policy.

Please complete all sections of the following application using BLOCK CAPITALS			
SECTION 1 – CHILD DETAILS			
Details of the young person for whom this application is being made.			
First Name:			
Middle Name:			
Surname:			
Child's Address:			
Date of Birth:			
Eircode:	PPSN:		

SECTION 2 – DETAILS OF PARENT/GUARDIAN

This 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, one letter will issue addressed to both individuals.

	Parent / Guardian 1	Parent / Guardian 2
Prefix:(Mr/ Ms/Ms etc.)		
First Name:		
Surname:		
Address		
Address:		
Eircode:		
Telephone no.		
Email address:		
Relationship to child:		
Name & address of current school/pre- school (if any):		

SECTION 3 – STUDENT CODE OF BEHAVIOUR

Please confirm that the Student Code of Behaviour is acceptable to you as a parent/guardian, and you shall make all reasonable efforts to ensure compliance with same by the child if s/he secures a place in the school. Please note that the Code of Behaviour is available at

<u>https://www.wwetb.ie/schools/gorey-hill-school/</u> or by email from <u>goreyhillschool@wwetb.ie</u>. (Both parents/guardians should complete this section where both are making the application.)

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

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

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

This information will assist in determining whether the child meets the admission requirements. The list of questions is in the order of priority as per the Admission Policy for Gorey Hill School.

Is your child currently without an offer of a place in a special school for the school academic year 2023/2024?

Yes
No

 \Box

SECTION 5 - SELECTION CRITERIA FOR ADMISSION IN THE EVENT OF OVERSUBSCRIPTION

This information will assist in determining whether the child meets the admission requirements. The list of questions is in the order of priority as per the Admission Policy for Gorey Hill School.

A. Please confirm the child's address for the purpose of determining whether s/he resides in County Wexford or County Wicklow. Please note that recent proof of address will be required in support of this. (Only registered utility bills for the address, dated within the last three months and in the name of the parent(s)/guardian(s) will be accepted.)

Address:	

All Application Forms and accompanying documentation should be sent to:	For office use only
Gorey Hill School c/o Waterford and Wexford ETB Ardcavan Business Park, Wexford Y35 P9EA	Date received:// School/ETB Stamp:

IMPORTANT INFORMATION:

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

- □ Fully completed Admission Application Form signed by Parent(s)/Guardian(s)
- □ An original birth-certificate (together with a copy).
- □ Recent proof of address such as current utility bill (gas, electricity or telephone or mobile phone bill), or current car or home insurance policy that shows your address or a document issued by a government department that shows your address, dated within the last three months and in the name of the parent(s)/guardian(s) will be accepted.
- □ Recent psychological assessment reports or a report which has been prepared within the 24 months immediately preceding the child's application to the school confirming that the child has a diagnosis of autism **and** complex learning needs <u>or</u> complex learning needs, making a clear recommendation which states that the student requires a special school setting and the reasons why this is the case.

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 your responsibility to inform the school of any change in contact information or circumstances relating to this application.

For information regarding how your data is processed by the school and WWETB, please see the document DATA PROTECTION AND THE ADMISSIONS PROCESS FOR GOREY HILL SCHOOL.

Please sign below to confirm that the contents of this form are correct and that you have read and understood the associated data protection information.

Signatures		
Signed:		Signed:
	(Parent / Guardian 1)	(Parent / Guardian 2)
Date:		Date:
Please note that it is not necessary for both parents/quardians to sign this application form, but the		

Please note that it is not necessary for both parents/guardians to sign this application form, but the person(s) who apply to enrol a child must be the child's legal guardian(s). Where a child has two legal guardians and application is made on behalf of a child by one of those guardians, the signature of that guardian confirms that the application is made with the permission of both guardians.

OFFICE USE ONLY

Date Application Received:

Checked by:

Date entered on School Database:

Entered by: