



Iontaobhas Scoileanna Éamainn Rís
Edmund Rice Schools Trust

Scoil Iósaif an Fhionnradharc – St. Joseph's, Fairview

Principal: Mr. Séan Stack

Deputy Principal: Ms. Alexandra Duane

Application Form – New Entrants

Year of Entry: September _____

Personal Details

Surname: _____ First name: _____

(Please note it is school policy to record surnames as per birth certificate which **must** be supplied before entry)

Address: _____

Date of birth: _____ Nationality: _____

PPSN of student: _____

Family Details

Mother's name: _____ Father's name: _____

Mother's Maiden name: _____

Email address: _____ Email address: _____

Mobile no: _____ Mobile no: _____

Home phone no: _____ Home Phone no: _____

Mobile no to be used for WebText: _____

Sibling(s) currently/previously enrolled in St. Joseph's

Name: _____ Year currently in OR of graduation: _____

Were either legal parent/guardian a past pupil of the school? _____

Please note, verifying documentation will need to be provided if this criteria is to be used for admission



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Emergency and Medical Details

In the event that the school is unable to contact the above please give another name and number the school can contact.

Name: _____ Connection to family: _____
(Relation, Neighbour)

Phone no: _____

Family Doctor's name: _____

Family Doctor's no: _____

Medical conditions: _____

Education Details

Name and address of present school: _____

Current Class/Year: _____

Psychological/Educational Report(s) Yes: _____ No: _____
(required for inclusion for application for ASD unit placement)

Diagnosis: _____

Report(s) included: Yes: _____ No: _____

Irish Exemption: Y / N (Please state when exemption was received and reason)



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Applicants should read the school's Admission Policy, which is available on www.stjosephsfairview.ie prior to completing the application form.

The information requested on the application form is required in order to process your application for admission to the school. The information provided by you will be treated confidentially and processed in line with the school's Admission Policy.

Any personal data provided on this form will be used to (i) identify applicants (ii) process an application in line with the school's admissions policy (iii) communicate with parents/guardians in respect of an application (iv) notify parents/guardians of the outcome of an application.

The information will be retained for an appropriate period thereafter to address any potential queries arising from the application process or added to the student's school file in the case of successful applicants.

In accordance with section 66(6) of the Education Act 1998, as amended, personal data relating to applications for admission may be shared with the board of management of another school or the patron in order to facilitate the efficient admission of students. This information may include the date on which an application was received by the school, the date on which an offer was made and the date on which an offer was accepted. Personal information concerning applicants may also be shared, including their name, address, date of birth and PPS number.

Further information on the handling of your personal data, including how to exercise your rights under GDPR, is set out in the school's Data Protection Policy.

I/We give permission for Scoil Iósaif to access the files in my child's Primary School that are relevant to their transfer to second level education. This includes any educational assessments, psychological, psychiatric report/or SCP reports.

Signature of Parent / Guardian: _____

Date: _____

**PLEASE RETURN SIGNED FORM WITH A COPY OF YOUR CHILD'S BIRTH CERTIFICATE,
TWO RECENT SCHOOL REPORTS AND ANY OTHER RELEVANT EDUCATIONAL REPORTS
THAT MAYBE USED TO SUPPORT YOUR APPLICATION
TO SCOIL IÓSAIF, FAIRVIEW, DUBLIN 3**
