



SAINT VINCENT'S
CASTLEKNOCK COLLEGE

Dublin 15, Ireland
Telephone 01 8213051

Email: admissions@castleknockcollege.ie

web: www.castleknockcollege.ie

Application for Years other than First Year

Applicant

Surname:		First Name:				
Middle Name:						
Name by which student is known at home:						
Home Address:						
Tel No:						
Intended Date of Entry: _____						
Intended Year of Entry:		2 nd Year	3 rd Year	4 th Year	5 th Year	6 th Year
(Please circle appropriate year)						
Date of Birth		PPS No:				
Country of Birth:		Nationality:				
Name of Present School:		Exempt from Irish: Yes <input type="checkbox"/> No <input type="checkbox"/>				
Roll No of Present School:		(if yes application must be accompanied by certificate of exemption)				
Previous Schools Attended:		Permission to contact previous school principal for school reference <input type="checkbox"/>				

Family

Parent / Guardian 1	
Full Name:	
Address:	
Mobile No:	Email Address:
Parent / Guardian 2	
Full Name:	
Address:	
Mobile No:	Email Address:
Emergency Contact Details - person who may be contacted in an emergency in the event that neither parent can be contacted.	
Name: _____ Mobile No: _____	
NOTE: It is the responsibility of Parents / Guardians to inform the College of any changes to the emergency contact detail.	
Brother(s) or other relative(s) in the school now or in the past: (state full name, relationship to Applicant and year Leaving Certificate was completed / to be completed)	

Tell us about your son (Hobbies, interests, sports, pastimes, etc). Use an extra sheet if needed.

Agreement

I / We understand and accept that:

- 1) registration of this application does not imply any guarantee of a place at Castleknock College.
- 2) all students attend RE classes for the full six years of education at Castleknock College.
- 3) TY is compulsory at Castleknock College.
- 4) before the school term commences fees are required to be paid either in full by EFT / cheque or ten equal monthly instalments by direct debit commencing mid-August (any other payment arrangement must be agreed with the Accounts Department in advance of the school year).
- 5) three months' notice is required before the withdrawal of a boy and that in lieu of such notice half a year's fees will be charged.
- 6) no remission of fees is granted for a boy's unavoidable absence through sickness or for any other reason.
- 7) a non-refundable deposit will be required on acceptance of a place.
- 8) any existing or future relevant educational / psychological assessment reports must be made available to the College on acceptance of a place. These include Psychological Report, Medical / OT Report, Current SNA / Resource hours, etc.

I / We agree to abide by the College Code of Behaviour and College policies, including those of punctuality, appearance, attendance, and respect for others. This does not preclude the rights of Parents / Guardians to appeal decisions of a disciplinary nature made by the College as laid out in the Education Act 1998.

Parents / Guardians are expected to support the ethos of the College as set out in our Mission Statement and supporting documents.

Signed: _____ Date: _____

Signed: _____ Date: _____

This Application Form should be completed and returned to the Admissions Office, Castleknock College, College Road, Dublin 15, D15 PD95 or by email and should be accompanied by:

- *the full version of the applicant's Birth Certificate*
- *the latest available school report*
- *two passport sized photographs*
- *application fee of €100 -- non-refundable (payable by EFT or cheque)*

Date Received:		Birth Cert enclosed: Y / N	Birth Cert returned: Y / N
Date of entry:		Year of entry:	Registration fee enclosed Y / N
Place Offered Y / N	Reason		
Date Deposit received:			
<u>OR</u>			
Place on Waiting List			