



*Assumption Secondary School*  
*Walkinstown,*  
*Dublin 12.*

## **Application Form - First Year 2025-2026**

Applicants should read the school's Admission Policy, which is available on [www.assumptionwalkinstown.ie](http://www.assumptionwalkinstown.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, which is available on [www.assumptionwalkinstown.ie](http://www.assumptionwalkinstown.ie)

- Please complete this form in BLOCK CAPITAL LETTERS.
- All parts of the application form must be fully completed.
- Application can only be made when your daughter is in 6<sup>th</sup> class.

**Please return the following items to the school office by 3.40pm on Tuesday 22<sup>nd</sup> October 2024.**

**Please note: The school will be closed for Mid Term Break from Monday 28<sup>th</sup> October to Friday 1<sup>st</sup> November inclusive.**

- 1. The completed Application Form.**
- 2. A copy of your daughter's Birth Cert.**

## SECTION A

### APPLICANTS PERSONAL DETAILS

Applicant's Name: \_\_\_\_\_ Surname \_\_\_\_\_

Applicant's Home Address: \_\_\_\_\_

Eircode (must be included): \_\_\_\_\_

Applicant's Date of Birth: \_\_\_\_\_

*\*please attach a copy of Birth Cert.*

Applicant's P.P.S. Number: \_\_\_\_\_

*\*Your application cannot be completed without this number. This P.P.S. number can be obtained from your local Social Welfare office.*

Name of Primary School attended by applicant: \_\_\_\_\_

Primary School address: \_\_\_\_\_

Names of sisters currently attending Assumption Secondary School: \_\_\_\_\_

Names of sisters who are past pupils: (1) \_\_\_\_\_ Year of Leaving Cert: \_\_\_\_\_

(2) \_\_\_\_\_ Year of Leaving Cert: \_\_\_\_\_

School registered name if mother is a past pupil \_\_\_\_\_ Year of Leaving Cert: \_\_\_\_\_

Applicant's Country of Birth: \_\_\_\_\_

*(This is required by the Department of Education & Skills. Parents GNIB may be requested.*

## SECTION B

### CONTACT DETAILS

Mother's Full Name: \_\_\_\_\_

Father's Full Name: \_\_\_\_\_

Mother's Former surname(s) if any: \_\_\_\_\_  
\_\_\_\_\_  
*(Required by D.E.S.)*

Mother's Home Address: \_\_\_\_\_

Father's Home Address: \_\_\_\_\_

Telephone (Mobile): \_\_\_\_\_

Telephone (Mobile): \_\_\_\_\_

Telephone (Home): \_\_\_\_\_

Telephone (Home): \_\_\_\_\_

Telephone (Work): \_\_\_\_\_

Telephone (Work): \_\_\_\_\_

Email Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

If Parent(s)/Guardian(s) are living at separate addresses should written correspondence be sent to

Mother's Address       Father's Address       Other (*please specify*)

Other: \_\_\_\_\_

Parent/Guardian Priority Mobile Number: \_\_\_\_\_  
(*This mobile number will be used by the school to text parent/guardian during the year with important school related information – one number only.*)

**Additional Contact Number (other than parent)**

(*This is an additional number the school can use to make contact only in case of emergency and if the parent/guardian cannot be contacted.*)

Name: \_\_\_\_\_      Mobile No: \_\_\_\_\_

I/we being the parent/Guardian of \_\_\_\_\_ (Please print name clearly)  
confirm that all details supplied on this form are correct.

Parent/Guardian signature 1. \_\_\_\_\_ Name printed \_\_\_\_\_.

Parent/Guardian signature 2. \_\_\_\_\_ Name printed \_\_\_\_\_.

**FOR OFFICE USE ONLY:**

**Please tick the boxes if the following have been provided.**

1. Completed application form.

2. A copy of the applicants Birth Certificate

Date and time form received \_\_\_\_\_

Form received by \_\_\_\_\_