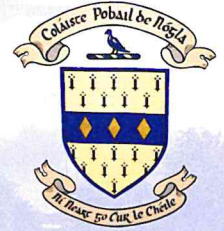




Nagle Community College Coláiste Pobail de Nágla



Principal: Mr. Jim O'Sullivan
Deputy Principal: Mr. Nicholas O'Keeffe

Avenue de Rennes,
Mahon, Blackrock, Cork. T12 WT21

Date received:

Tel: (021) 4358633

Email: office@nagle.ie

Website: www.naglecc.ie

STUDENT APPLICATION FORM

I wish to have the following student considered for a place in Nagle Community College beginning in the academic year _____.

Pupil's Name: _____
(As per Birth Certificate)

Address: _____

Date of Birth: _____ / _____ / _____

Present School: _____

Parent's / Guardian's Names: _____

Parent's / Guardian's Phone Numbers: _____

Number of children in family: (circle as appropriate)								
1	2	3	4	5	6	7	8	9

The applicant's place in family: (circle as appropriate)								
1	2	3	4	5	6	7	8	9

Are any brothers / sisters *currently* in attendance at Nagle Community College (please tick) Yes No
If 'yes', please indicate names and the year they are currently in:

- (1) _____
- (2) _____
- (3) _____

Were any brothers / sisters *previously* in attendance at Nagle Community College (please tick) Yes No
If 'yes', please indicate name and the year they left:

- (1) _____
- (2) _____
- (3) _____

Any other relevant information you may wish to supply: (eg.; strengths, weaknesses, SEN, interests, etc)

Please refer to admissions policy available on www.naglecc.ie

Are you applying for a place in the Nagle Community College ASD Special Classes? (please tick) Yes No

Data Protection Statement

Acknowledgement

By applying for and/or attending a CETB school/college/programme, I acknowledge that CETB may process my personal data (e.g. name, address, contact details, education), including sensitive personal data (where I opt to provide this information e.g. racial or ethnic origin) that CETB collects about me in connection with my application for and attendance on a CETB education/training programme. I acknowledge that CETB may share my personal data (including my sensitive personal data) within your organisation and also with third parties in the education sector as well as other third parties listed in Section 3 of CETB's Data Protection Policy.

I acknowledge that I have reviewed CETB's Privacy Statement which sets out the full details regarding the processing of my personal data. I understand that I may also address any questions, comments and requests regarding CETB's data processing practices at dataprotection@corketb.ie.

Signature: _____ Date: _____

Footnote:

The Privacy Statement and Data Protection Policy referred to above are available at:
<http://cork.etb.ie/wp-content/uploads/sites/20/2018/05/CETB.Privacy-Statement-Students.pdf>; and
<http://cork.etb.ie/wp-content/uploads/sites/20/2018/05/CETB-Data-Protection-Policy-250418.pdf>

I wish to have the above named child considered for registration in "Nagle Community College".

I accept that this is an Application Form and not a Registration Form.

Signature: _____ Date: _____
(Parent/Guardian)

Please Note: This application form should be returned to "Nagle Community College". The closing date for applications will be made public by the following means; our school website, www.naglecc.ie, a letter distributed to all our feeder schools and on our Open Night.

A copy of a recent utility bill should be returned with the application as proof of residence of the child.