



### APPLICATION FORM

To be used to apply for a place in our **1<sup>st</sup> Year class** of 2019/2020.

Please read our Admissions Policy prior to application.

**Applications must be received by the school by Tuesday 9<sup>th</sup> October, 2018. Birth Cert must be provided.**

The Loreto Secondary School, Kilkenny is a Catholic girls' school conducted in accordance with the values and philosophy of the Loreto Education Trust. Please read our Mission Statement (overleaf).

Student's Surname: _____ Student's Forename: _____	
Student's Date of Birth: _____ (Copy of Birth Cert must be provided) Student's P.P.S. Number: _____	
Student's Address: _____	
Student's Nationality: _____ Student's Country of Birth: _____	
Name(s) of sisters currently/previously in Loreto Secondary School: _____ Year: _____	
Do you wish to have your daughter enrolled in the special class for students with a Moderate General Learning Disabilities (report to be provided with application): _____ If she is not allocated a place in this class, would you like her to be offered a place in a mainstream class? _____	
Student's G.P.'s Name & Address: _____ G.P. Telephone: _____	
Does the student hold a Medical Card: Yes <input type="checkbox"/> No <input type="checkbox"/>	
Does your daughter have a medical condition the school should be aware of Yes <input type="checkbox"/> No <input type="checkbox"/>	
If the answer is <b>YES</b> to the above question please provide the following information :	
Type of Medical Condition : _____	Symptoms: _____
Action required by the school : _____	Medication required : _____
Emergency contact Name and Number : _____	
Details of any activity restrictions as a result of this condition: _____	
Name of Current Primary School: _____ Name of Principal: _____	
Secondary School attended (if applicable): _____ Name of Principal: _____	
<b>FATHER/GUARDIAN'S DETAILS</b> Father/Guardian's Name: _____  Address: _____  Home Tel: _____ Mobile: _____  Email Address: _____	<b>MOTHER/GUARDIAN'S DETAILS</b> Mother/Guardian's Name: _____  Mother's Maiden Name: _____  Address: _____  Home Tel: _____ Mobile: _____  Email Address: _____

Mobile no. to be used to advise of attendance by text (choose one only): Father/Guardian  Mother/Guardian

Declaration (please tick box): I hereby declare that all information provided on this form is true and correct

Signature of Father/Guardian: \_\_\_\_\_  
Date: \_\_\_\_\_

Signature of Mother/Guardian : \_\_\_\_\_  
Date: \_\_\_\_\_

Personal data supplied on this application form will be used for the purposes of student enrolment, registration, administration, child welfare and on the request by An Garda Síochána in the course of an investigation or to another body who has a legal basis for requesting such information.

# Loreto Secondary School, Kilkenny.



## Mission Statement

“As a Catholic School in the Loreto Tradition, we aim to create a warm and caring community. In an atmosphere of respect and fairness, through support and friendship, we affirm each person’s self-worth and dignity.

We aim to provide a student-centered education that nurtures the talents and potential of all.

In co-operation with parents and guardians, we work towards the spiritual, moral, social and academic development of each student.

Our wish is that our students will grow into happy, confident and responsible adults.”