Application Form for Entry into First Year 2022/2023



Coláiste Mhuire, Ballygar, Co. Galway, F42 D265

Tel.: 090 6624740

Email: info@cmballygar.ie

Website:

www.colaistemhuire.org

- Completed forms will be accepted from 1st November 2021 to 10th January 2022 by 4pm.
- Applications received after 10th January will be treated as late applications – please refer to our Admission Policy on www.colaistemhuire.org
- Completion of this application form does not guarantee admission.
- The information requested on this form is required. The legal basis for the questions contained in this form is specified in our Admission Policy. All of the information that you provide on this application will be treated confidentially and in line with the school's Data Protection Policy.

Thank for taking time to apply to Coláiste Mhuire.

For official use only:

Received on: (date & time)

Received by:

Please complete form in BLOCK CAPTIALS

Student Personal Details:

Surname:	First Name:	
Address:		
Date of Birth:	Place of Birth:	
Student's name as it appears on birth certificate:		
PPSN:		

Primary School Details:

Timaly sensor because	
School Name:	
School Address:	
For entry into 1 st Year, I confirm that this applicant complete 6 th class in June 202:	is currently in 6 th class in primary school and will
Yes [] No []	
Parent/Guardian details:	
Parent/Guardian 1:	Parent/Guardian 2:

Parent/Guardian 1:	Parent/Guardian 2:
First Name:	First Name:
Surname:	Surname:
Address:	Address:
(if different to above)	(if different to above)
Eircode:	Eircode:
Tel. (Landline)	Tel. (Landline)
Mobile No.	Mobile No.
Email Address:	Email Address:

Please note we will communicate with parents predominantly through text and email, so please ensure that details provided are accurate.

Prior links to Coláiste Mhuire: (if any)

	Name(s):	Years Attended:
Has the applicant any sibling(s) currently in Coláiste Mhuire?		
Has the applicant any sibling(s) a past pupil of Coláiste Mhuire?		

I/We confirm that all of the information supplied is complete and correct [] (Please tick)		
Signature of Parent/Guardian 1:		Date:
Signature of Parent/Guardian 2: _		Date:

Any personal data provided on this form will be used to (i) identify a student and communicate with their parents/guardians (ii) process an application in line with the school's admissions criteria (iii) confirm the offer of a place where an application is successful. 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).