



Rockwell College Application Form - First Year

For Office Use Only

Date Received:

Place offered:

Place on waiting list:

Applying to commence: September 2024: Boarding pupil |
September 2025: Boarding pupil

PLEASE PRINT CLEARLY

Applicant's Name _____ Male

Date of Birth (DD/MM/YYYY) _____ PPS: _____

Religion: _____

Name of Parent(s) / Guardian: _____

Address: _____

Postcode: _____

Email: _____

Mother's Maiden Name: _____

Primary School Name & Address: _____

Parent/Guardian Contact Numbers:

Name: _____ Contact Number: _____

Name: _____ Contact Number: _____

Alternative Next-of-Kin Name: _____ Contact number: _____

OVERSUBSCRIPTION

In the event that Rockwell College is oversubscribed, the College will apply the selection criteria as set out in the Rockwell College Admissions Policy.

Please tick the following as relevant:

The applicant has a sibling currently attending Rockwell College. <i>Please give name of sibling and current year.</i>	
The applicant has a sibling who formerly attended Rockwell College. <i>Please give name of sibling and year left.</i>	
The applicant is a child of a member of staff at Rockwell College <i>Please give name of staff member</i>	
The applicant parent(s) / grandparent attended the College <i>Please give name of parent/grandparent</i>	
The applicant is a nephew/niece of a member of the staff at Rockwell College <i>Please give name of Congregation member</i>	
The applicant is a nephew/niece of a member of the Spiritan Congregation <i>Please give name of Congregation member</i>	
None of the above apply to this applicant	

CODE OF BEHAVIOUR

In accordance with section 23(4) of the Education (Welfare) Act 2000, Rockwell College is **not obliged** to accept an application when the parent/guardian of the applicant fails to confirm in writing that the Code of Behaviour of the school is acceptable to him or her **and** that he or she shall make all reasonable efforts to ensure compliance with such code by the applicant.

As the parent(s) / guardian of the applicant, I hereby confirm that the Code of Behaviour of Rockwell College is acceptable to me and that I will make all reasonable efforts to ensure compliance with the Code by the child on whose behalf I make this application:

Name (print): _____ Name (print): _____

Signature: _____ Signature: _____

Please return this form to: **Admissions Office, Rockwell College, Cashel, Co. Tipperary E25 ED60**