



Rockwell College Application Form

For entry to Year Groups other than First Year

For Office Use Only	Date Received:
Place offered:	Place on waiting list:

Applying to commence: September 2024: Boarding pupil Day Pupil

Commencing Year Group: _____

Current School: _____

Applicant's Name _____ Male Female

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

Religion: _____

Name of Parent(s) / Guardian: _____

Address: _____

_____ **Postcode:** _____

Mother's Maiden Name: _____

Parent/Guardian Contact Numbers:

Name: _____ **Contact Number:** _____

Contact email : _____

Name: _____ **Contact Number:** _____

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

Please outline the reasons for transferring from the current school: _____

Application for entry to years other than First Year must be accompanied by two school reports. The application will not be processed if the reports are not enclosed.

The applicant and parent(s) will be invited within 10 school days of receipt of the application to meet with the Principal/Deputy Principal at a time convenient to the applicant and parent, at which time the motivation for a change of school, the academic progress and the behaviour record of the applicant can be discussed. Suitability for boarding in a residential environment will also be discussed as appropriate.

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. This Policy is available on rockwellcollege.ie

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 ED6**