

Temple Carrig School

HIGHER YEARS SEPTEMBER 2022 APPLICATION FORM **CONFIDENTIAL**

(A separate form must be completed for each student)

Please complete **all** sections of this form in **block capitals**, attach a copy of **the most recently available school report for the applicant** as well as any other **supporting documentation** you would like to be considered and return by email to higheryears@templecarrigschool.ie. Postal applications cannot be accepted.

You should receive an email acknowledgement of your application within 48 hours. Please retain this email as proof of your application. If you don't receive the acknowledgement, email principal@templecarrigschool.ie so the matter can be investigated.

After the Higher Years Admissions process opens on 1st March, places in Higher Year groups will be allocated as they become available up until 31st August. A prompt return of this form is therefore recommended.

SECTION A:

1. Student's Name: _____
2. Date of Birth: _____
3. PPS No: _____
4. Home Address: _____
5. Present School and Class: _____

Application is hereby made to Temple Carrig School for a place in Year _____, commencing September 2022.

SECTION B:

Mother's Name: _____ Phone No: _____

Mother's Email: _____

Father's Name: _____ Phone No: _____

Father's Email: _____

SECTION C:

If you wish to claim a priority on the basis of a sibling* who is in Temple Carrig School or who has accepted the offer of a place, please give their details here:

Name: _____ Year of Entry: _____

** Only one sibling is required for this priority - if multiple siblings exist, there is no need to list more than one.*

Continued Overleaf

SECTION D:

Please set out the reasons why the applicant wishes to attend Temple Carrig School:

SECTION E:

Please indicate how the applicant expects to contribute to the life of Temple Carrig School if admitted:

SECTION F:

- I understand that that it is a requirement and responsibility of each applicant to supply the school with copies of recent school reports
- I have attached any supplementary information I wish to be considered (special circumstances, talents etc) with this application
- I understand that it is up to each applicant to notify the school of any changes to details on this form
- I confirm that all details in this application are correct to the best of my knowledge

Signed: _____ (Parent/Guardian)

Date: _____

For office use only:

Form Received: _____ Checked and acknowledged: _____