

Middle Name:



Ó Fiaich College, Hoey's Lane, Dublin Road, Dundalk, Co. Louth, A91WK75

Telephone: (042) 9331398, E-Mail: info@ofi.ie, Website: www.ofiaichcollege.ie

APPLICATION FORM FOR ADMISSION TO FIRST YEAR- 2026/2027

This is an application form for admission to First Year and place, implied or otherwise. Use of the word 'student' throunds imply that the person on whose behalf this application having been accepted as a student of Ó	ughout this Application Form does on is being made is regarded as a
Completed applications will be accepted from:	02/10/2025
The closing date for receipt of applications is:	23/10/2025
All Application Forms and accompanying documentation should be sent to:	For office use only
Ó Fiaich College Hoey's Lane Dublin Road Dundalk Co. Louth A91WK75	Date received:// School Stamp:
Please ensure you return the following documents to the sch Recent proof of address (only registered utility bills for three months and in the name of the parent(s)/guardia An original long birth-certificate (together with a copy)	or the address, dated within the last an(s) will be accepted).
Please complete all sections of the following applica	tion using BLOCK CAPITALS
SECTION 1 - PROSPECTIVE STUDEN	T DETAILS
Details of the young person for whom this appli	ication is being made.
First Name:	

Surname:										
Student Address:										
Eircode:										
PPSN:										
Date of Birth:		Day		Month		-		Yea	r I	
	SEC	CTION 2	- DETAIL	S OF PAI	RENT	/GU/	ARDIAN			
This section is <u>NOT</u> required to be completed where the student is over 18, unless s/he wishes the school to communicate with his/her parent/guardian about this application instead of directly with the student. The information is sought for the purposes of making contact about this application. If more than one name is given but the address is the same, only one letter will issue and will be addressed to both individuals.										
	Parent / Guardian 1				Parent / Guardian 2					
Prefix: (<i>e.g.</i> Mr. / Ms. / Ms. <i>etc</i> .)										
First Name:										
Surname:										
Address:										
Eircode:										
Telephone no.										
Email address:										

Relationship to

student:

SECTION 3 – STUDENT CODE OF BEHAVIOUR					
Please confirm that the Student Code of Behaviour is acceptable to you as a parent/guardian and that you shall make all reasonable efforts to ensure compliance of same by the student if s/he secures a place in the school. Please note that the Code of Behaviour can be found at www.ofiaichcollege.ie or from the school office.					
I	confirm that the Code of Behaviour for the				
school is acceptable to me as the student's parent/guardian and I shall make all reasonable					
efforts to ensure	compliance by the student if s/he secures a place in the school.				
SECTION 4 – S	SELECTION CRITERIA FOR ADMISSION IN THE EVENT OF OVERSUBSCRIPTION				
-	will assist in determining whether the student meets the admission requirements am year group in accordance with the order of priority as set out in the applicable section of Part B of the Admission Policy for Ó Fiaich College.				
in the cato of this. (C	offirm the student's address for the purpose of determining whether s/he resides chment area. Please note that recent proof of address will be required in support only registered utility bills for the address, dated within the last three months a name of the parent(s)/guardian(s) will be accepted				
Address:					
B. Please pro	ovide details of the Primary school attended by the student				
School name:					
School address:					

establish year to w class (or e	whether the student will be hich s/he is applying to be	of birth and current class and school, in order to 12 years of age by the 31st January of the academic enrolled in First Year, after having completed sixth ol. Please note that an original long birth certificate in support of this.			
Date of Birth:					
Current Primary School:					
Current Class/Year:					
IMPORTANT INFO	ORMATION:				
 You are required to submit: Recent proof of address – two distinct registered utility bills in relation to the address, dated within the last three months and in the name of the parent(s)/guardian(s). An original long Birth Certificate (together with a copy). 					
it is four	•	de in this Application Form is taken in good faith. If ation is incorrect, misleading or incomplete, the			
Policy. Please un informati For inform	derstand that it your respon on or circumstances relating	processed by the school, in line with the Admission is ibility to inform the school of any change in contact g to this application. Sonal data is processed by the school and LMETB,			
Please sign below	v to demonstrate that you h	nave read and understood this information.			
student will be as		in Ó Fiaich College, there is no guarantee that the ject choice due to resource issues and/or restrictions			
(Parent / Guardiai	n 1)	(Date)			
	 n 2)	(Date)			

OFFICE USE ONLY	
Date Application Received:	
Checked by:	
Date entered on School Database:	
Entered by:	

DATA PROTECTION

The Board of Management of Ó Fiaich College is a committee of LMETB, Abbey Road, Navan, Co. Meath, C15 N67E, which is a data controller under the General Data Protection Regulations and the Data Protection Acts 1988 - 2018. The Data Protection Officer for LMETB is Sinead Barry and she can be contacted at LMETB, Abbey Road, Navan, Co. Meath, C15 N67E or Via E-Mail: dataprotection@lmetb.ie

The personal data supplied on this Application Form and the accompanying documentation sought is required for the purpose of:

- Verification of identity and date of birth;
- Verification and assessment of admission criteria;
- Allocation of teachers and resources to the school; and
- School administration,

all of which are tasks carried out pursuant to various statutory duties to which LMETB is subject.

Failure to provide the requested information may result in the application being deemed invalid and an offer of a place may not be made.

The personal data disclosed in, or as part of, this Application Form may be communicated internally within LMETB and externally with the NCSE and/or NEPS for the purpose of determining the applicability of the selection criteria and/or allocating places in special classes, and possibly with the patron or board of management of other schools in order to facilitate the efficient admission of students, pursuant to section 66(6) of the Education Act 1998 as inserted by section 9 of the (Admissions to Schools) Act 2018. It may also be shared with Tusla Education Support Services for the purpose of assisting the student with education and training opportunities, in line with section 28 of the Education (Welfare) Act 2000.

The personal data provided in this Application Form will be kept for 7 years from the date on which the student turns 18 years of age, unless there is a statutory requirement to retain some or all elements of the data for a further period or indefinitely, in line with XXETB's Data Retention Policy, which can be found at https://www.lmetb.ie/about-us/data-protection/

A copy of the full LMETB Data Protection Policy is available at https://www.lmetb.ie/wp https://www.lmetb.ie/wp</a

Any person who provides personal data through this Application Form has a right to request access to that data and to request the changing of any information if it is factually incorrect. A request for erasure of the data can also be made by or on behalf of the data subject but this will only be acceded to where the data is no longer necessary for the purpose for which it was collected and where LMETB does not have a legal basis for retaining it.

If you as a data subject have any complaints regarding the processing of your personal data, you have the right to lodge a complaint with the Data Protection Commission.