



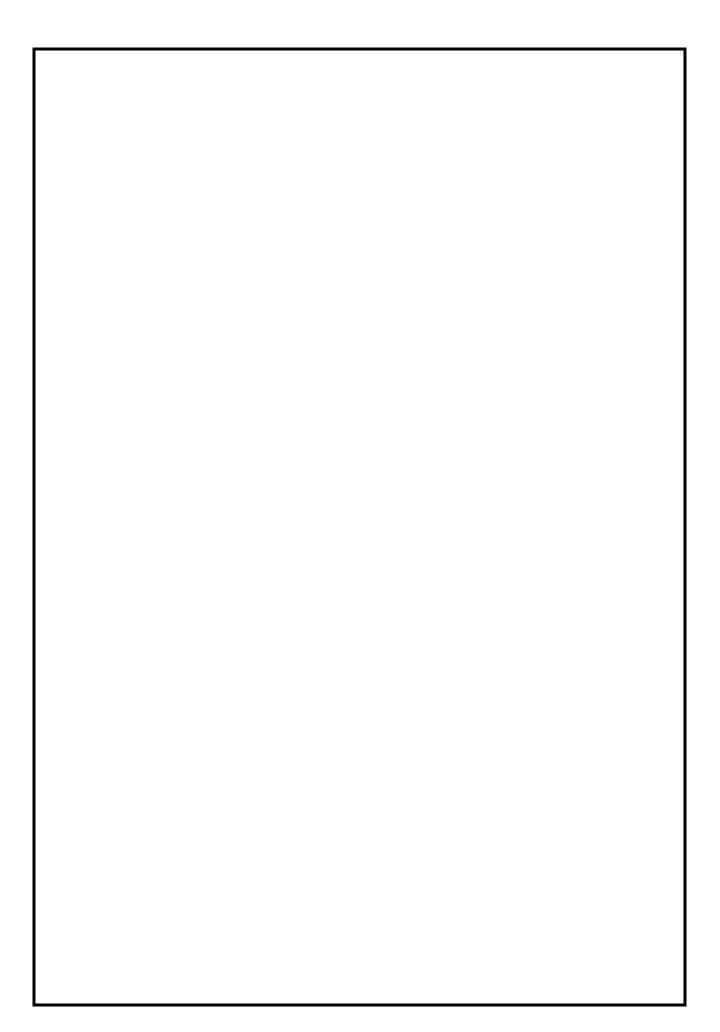
Raheny Lane, Rathmore Road, Lusk, Co. Dublin

# LCC FIRST YEAR APPLICATION FORM FOR ADMISSION – 2024/2025

otherwise. Use of	cation form for admission and does not const the word 'student' throughout this Applicatio his application is being made is regarded as a Lusk Community College.	on Form does not imply that the person a having been accepted as a student of			
Completed applic	ations will be accepted from:	Monday, 2 <sup>nd</sup> October 2023			
The closing date f	or receipt of applications is:	Tuesday, 24 <sup>th</sup> October 2022 12pm			
All Application I	Forms and accompanying documentation should be sent to:	For office use only			
Lusk Community ( Raheny Lane, Rathmore Road, Lusk, Co. Dublin.	College	Date received:// School Stamp:			
Please ensure you return the following documents to the school to complete the application:  Recent proof of address (only registered utility bills for the address dated within the last three months and in the name of the parent(s)/guardian(s) will be accepted).  If applying for the Special Class, a Relevant Report completed within the previous 24 months.					
Please tick the Year Group the student is applying to enter:  First Year 2024/2025					
Please	complete all sections of the following applica	ntion using BLOCK CAPITALS			
	SECTION 1 - PROSPECTIVE STUDE				
First Name:	Details of the young person for whom this appl	ication is being made.			

Middle Name:											
Surname:											
Date of Birth											
Student Address:											
Eircode:											
PPSN:											
	S	ECTION 2 -	- DETAILS	S OF PAR	ENT/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.											
		Paren	t / Guard	lian 1		Parent / Guardian 2					
Prefix: (e.g. Mr. / Ms. / Ms. etc.)											
First Name:											
Surname:											
Address:											
Eircode:											
Telephone no.											
Email address:											
Relationship to student:											

# SECTION 3 – STUDENT CODE OF BEHAVIOUR (completed by parent/guardian) 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.luskcommunitycollege.ie or from the school office adminluskcc@ddletb.ie 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. Signed: Date:\_\_\_\_ Parent/Guardian **SECTION 4 – SPECIAL CLASS** The special class in Lusk Community College teaches students who have one or more of the following special educational needs: Autism Spectrum Disorder, Asperger Syndrome Please **ONLY** complete if you are applying for the special class. Please confirm if this application is being made for: The special class only: □ The special class **or** the mainstream year group: $\square$ OR (Tick this box if you are applying for a place in the mainstream class even if there are no places in the special class.) Where the student is seeking a place in the special class, please provide details below of the special educational need(s) of the student. A Relevant Report confirming the special educational need and the recommendation for the special class, completed within the last 24 months, must also be provided to the school with this Application Form so as to be considered for admission to the special class. Please note: as per the school's Admission Policy, eligibility for the special class is subject to the Student having needs which fall within the category of special educational needs provided for by the special class, as confirmed by the NCSE, and for transfer students, is also subject to there being a place available in the relevant year group. Details of special educational need:



## SECTION 5 – SELECTION CRITERIA FOR ADMISSION IN THE EVENT OF OVERSUBSCRIPTION

This information will assist in determining whether the student meets the admission requirements in accordance with the order of priority as set out in the applicable section of Part B of the Admission Policy for Lusk Community College.

A. Please confirm the student's address for the purpose of determining whether s/he resides in the catchment area. Please note that recent proof of address will be required in support of this. (Only registered utility bills or bank statements dated within the last three months and in the name of the parent(s)/guardian(s) will be accepted.)				
Address:				
	dent <u>currently</u> has any siblings in this school, please indicate their names and year of study.			
(i) Name:				
Year:				
(ii) Name:				
Year:				
(iii) Name:				
Year:				
(iv) Name:				
Year:				
C. Please pi	rovide details of the primary school attended by the student.			
School name:				
School address:				

### **IMPORTANT INFORMATION:**

- You are required to submit recent proof of address two distinct only registered utility bills in relation to the address dated within the last three months and in the name of the parent(s)/guardian(s) will be accepted.
- All of the information that you provide in this application form is taken in good faith. If it
  is found that any of the information is incorrect, misleading or incomplete, the application
  may be rendered invalid.
- Please understand that it your responsibility to inform the school of any change in contact information or circumstances relating to this application.
- For information regarding how your data is processed by the school and DDLETB, please see overleaf.
- Please sign below to demonstrate that you have read and understood this information.

**NOTE:** Should the student receive a place in Lusk Community College, there is no guarantee that the student will be assigned his/her selected subject choice due to resource issues and/or restrictions on the numbers of students per class.

(Parent / Guardian 1)	(Date)	
	OFFICE USE ONLY	
Date Application Received:		
Checked by:		
Date entered on School Database:		
Entered by:		

### **DATA PROTECTION**

The Board of Management of Lusk Community College is a committee of DDLETB, 1 Tuansgate, Belgard Square East, Tallaght, Dublin 24, which is a data controller under the General Data Protection Regulations and the Data Protection Acts 1988 - 2018. The Data Protection Officer for DDLETB is Caitriona Murphy and can be contacted at <a href="mailto:dataprotection@ddletb.ie">dataprotection@ddletb.ie</a>

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 DDLETB 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 this Application Form may be communicated internally within DDLETB for the purpose of determining the applicability of the selection criteria 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.

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 DDLETB's Data Retention Policy, which can be found at <a href="https://www.ddletb.ie">www.ddletb.ie</a>

A copy of the full DDLETB Data Protection Policy is available at <a href="www.luskcommunitycollege.com">www.luskcommunitycollege.com</a> or from the school office, <a href="mailto:adminluskcc@luskcc.ie">adminluskcc@luskcc.ie</a>

Any person who provides personal data through this Application Form has a right to request access to that data. S/he also has a right 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 DDLETB 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.