COLÁISTE POBAIL NA CÚLÓIGE

Príomhoide/Principal: Sarah Ferns

Leas-Príómhoide / Deputy Principal: Ciaran Wrynne

APPLICATION FORM FOR 1ST YEAR MAINSTREAM ADMISSION – 2027/2028

Completed applications will be accepted from: **1st October 2026**
The closing date for receipt of applications is: **23rd October 2026**
All Application Forms and accompanying documentation should be returned directly to Coolock Community College, Clonshaugh Road, Coolock, Dublin 17, D17 KH66:
Please deliver the application form and relevant documents to the school office between 9am and 4pm Monday to Friday. Incomplete applications will not be accepted. Email applications will not be accepted. Postal applications will be accepted at your own risk.

For office use only

Date Received: ____/____/_____ School Stamp

PPS	☐	Primary School	☐
Birth Certificate	☐	Date	☐
Proof of Address	☐		

Details of the young person for whom this application is being made.	
First Name:	
Surname:	
Primary School:	

City of Dublin Bord Oideachais agus Oiliúna Education and Training Board

STATE · MULTI-DENOMINATIONAL · CO-EDUCATIONAL · Excellence in Education · Respect · Care · Community · Equality

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Please ensure you return the following documents to the school to complete the application:

☐ An original birth-certificate. (If not copied on the spot it will be returned by Post)

☐ Recent proof of address (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).

Please complete all sections of the following application using BLOCK CAPITALS									
SECTION 1 - PROSPECTIVE STUDENT DETAILS									
Details of the young person for whom this application is being made.									
First Name:									
Middle Name:									
Surname:									
Student Address:									
Eircode:									
PPSN:									
Date of Birth:	**Day**		**Month**		**Year**				

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SECTION 2 – DETAILS OF PARENT/GUARDIAN		
This section is NOT 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: (*e.g.* Mr. / Ms. / Ms. *etc.*)		
First Name:		
Surname:		
Address:		
Eircode:		
Telephone no.		
Email address:		
Relationship to the student:		

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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.coolockcommunitycollege.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.

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SECTION 4 – 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 Coolock Community College. *Note: if the application is being made for the special class only, this section does not have to be completed. However, if the application is being made for the special class and/or the mainstream, this section and a separate application form for the Special Class must be completed*

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 3 months and in the name of the parent(s) or guardian(s) will be accepted.

Address:	
	Eircode:

B. If the student currently has any siblings in the school, please indicate their name(s) and current year of study.

(i) Name:	
Year:	
(ii) Name:	
Year:	

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C. If the student previously had any siblings in the school, please indicate their name(s) and years of attendance.	
(i) Name:	
Year(s):	
(ii) Name:	
Year(s):	

D. If the student's parent(s) or grandparent(s) previously attended this school, please indicate their name(s) and years of attendance.	
(i) Name:	
Year(s):	
(ii) Name:	
Year(s):	

E. Please provide details of the primary school attended by the student.	
School name:	
School address:	

Please confirm that the student attended this primary school for all of 5th class (and is now in 6th class in this school). Please be advised that the primary school will be asked for confirmation of same.	☐ **Yes** ☐ **No**

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F. Please provide the student's date of birth and current class and school, in order to establish whether the student will be 12 years of age by the 31st January of the academic year to which s/he is applying to be enrolled in First Year, after having completed sixth class (or equivalent) in primary school. Please note that an original long birth certificate (along with a copy) will be required in support of this. [This can only be used if selected under "*selection criteria*" in the school's Admission Policy. Delete this instruction.]	
Date of Birth:	
Current Primary School:	
Current Class:	

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IMPORTANT INFORMATION:

You are required to submit:

(i) An original long birth-certificate (together with a copy), and

(ii) Recent proof of address - 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.

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.

Incomplete applications will not be processed by the school, in line with the Admission Policy.

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 City of Dublin ETB, please see overleaf.

Please sign below to demonstrate that you have read and understood this information.

NOTE: *Should the student receive a place in Coolock 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)**

_____ _____

(Parent / Guardian 2) **(Date)**

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DATA PROTECTION

The Board of Management of Coolock Community College is a committee of City of Dublin ETB, [Town Hall, Ballsbridge, Dublin 4] which is a data controller under the General Data Protection Regulations and the Data Protection Acts 1988 - 2018. The Data Protection Officer for City of Dublin ETB is Angela Leydon and can be contacted at City of Dublin ETB, 01-6680614.

Other than for the personal data related to the student's ethnicity, which is sought by the Department of Education and optional to provide, the personal data supplied on this Acceptance Form and accompanying documentation sought is required by the school for the purpose of:

- Verification of identity;
- Allocation of teachers and resources to the school;
- School administration;
- Student enrolment & registration;
- Determining a student's eligibility for additional learning supports;
- Child welfare (including medical welfare) and
- Fulfilling our other legal obligations including the election of parent/guardian representatives to the ETB under the Education and Training Boards Act, 2013,
-

all of which are tasks carried out pursuant to various statutory duties to which City of Dublin ETB is subject. The processing of that personal data supplied on this Application Form is therefore carried out in line with Article 6(c) of the General Data Protection Regulation.

Failure to provide the requested information (except for the personal data related to the student's ethnicity, which is sought by the Department of Education and optional to provide) may result in the withdrawal of an offer of a place in the school.

While the information provided will generally be treated as private to City of Dublin ETB and will be collected and used in compliance with the Data Protection Acts 1988 – 2018, from time to time it may be necessary for us to transfer the personal data to other bodies (including the Department of Education, the Department of Social Protection, An Garda Síochána, the Health Service Executive, Tusla (CFA) social workers or medical practitioners, the National Educational Welfare Board, the National Council for Special Education, any Special Education Needs Organiser, the National Educational Psychological Service, or (where the student is transferring) to another school/centre). We also may communicate some of the data 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. We rely on parents/guardians and students to provide us with accurate and complete information and to update us in relation to any change in the information provided.

The processing of the student's ethnicity is based on consent (Article 6(1)(a) of the GDPR) and is requested by the Department of Education pursuant to Circular 0033/2025. The data will be input to the Department of Education's I.T. PPOD system by the school and then used for statistical analysis. Any queries in relation to same should be directed to the Data Protection Unit, Department of Education, Cornamaddy, Athlone, County Westmeath, N35 X659, via email at: dpo@education.gov.ie and on the telephone at: (090) 648 3908.

The personal data provided in this Acceptance 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 City of Dublin's Data Retention Policy, which can be found at www.cdetb.ie.

A copy of the full City of Dublin Data Protection Policy is available at www.cdetb.ie or from the school office.

Any person who provides personal data through this Acceptance 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 City of Dublin ETB 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.