



wwetb

Bord Oideachais agus Oiliúna
Phort Láirge agus Loch Garman
Waterford and Wexford
Education and Training Board

Príomhoide/ Principal: Mr Adrian Power
Leas-Phríomhoide/ Deputy Principal:
Ms Anne Cullen & Ms Ashling Canavan



Coláiste Bhaile an Droichid

Bridgetown College

Enrolment Application Form

1st Year

2024-2025

T: (053) 9135257 email: bridgetowncollege@wwetb.ie Uimhir Rolla/Roll No: 71610E



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| Completed applications will be accepted from: | 02-10-2023 |
| The closing date for receipt of applications is: | 24-10-2023 |

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|--|---|---|---|---|---|---|---|---|--|---|---|---|---|---|---|---|---|
| All Application Forms and accompanying documentation should be sent to: | For office use only | | | | | | | | | | | | | | | | |
| Applications Office Bridgetown College Bridgetown Co. Wexford Y35 R628 | Date received: | | | | | | | | | | | | | | | | |
| | <table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> </table> | | | | | | | | | D | D | M | M | Y | Y | Y | Y |
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| | D | D | M | M | Y | Y | Y | Y | | | | | | | | | |
| School Stamp: | | | | | | | | | | | | | | | | | |
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|---|-------------------------------|---|---|---------------------------------|---------------------|---|---|
| Please complete all sections of this form using BLOCK CAPITALS | | | | | | | |
| SECTION 1 –STUDENT DETAILS | | | | | | | |
| <i>Details of the young person enrolling in Bridgetown College.</i> | | | | | | | |
| First Name: | | | | | | | |
| Middle Name: | | | | | | | |
| Surname: | | | | | | | |
| Date of Birth: | | | | | | | |
| | D | D | M | M | Y | Y | Y |
| PPSN: | | | | | | | |
| Sex: [tick one] | <input type="checkbox"/> Male | | | <input type="checkbox"/> Female | | | |
| Nationality: | | | | | | | |
| Mother's Maiden Name: | | | | | | | |
| Address: | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| Eircode (If known): | | | | | | | |
| Present School: | | | | | Roll Number: | | |

| | |
|-----------------------------|----|
| Details of Siblings: | 1. |
| | 2. |
| | 3, |

| SECTION 2 – DETAILS OF PARENT/GUARDIAN | | |
|---|----------------------------|----------------------------|
| <i>The information is sought for the purposes of making contact in relation to the student. 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.</i> | | |
| | Parent / Guardian 1 | Parent / Guardian 2 |
| Mr. / Ms. / Ms. etc.) | | |
| First Name: | | |
| Surname: | | |
| Address: | | |
| | | |
| | | |
| | | |
| | | |
| Eircode: | | |
| Telephone no. | | |
| Email address: | | |
| Relationship to student: | | |

| SECTION 3 – STUDENT CODE OF BEHAVIOUR |
|--|
| Please note that the Code of Conduct can be found on our website or from the school office. |
| I _____ confirm that the Code of Conduct for the school is acceptable to me as the student’s parent/guardian and I shall make all reasonable efforts to ensure compliance if s/he secures a place in the school. I acknowledge that this may change with approval of the Board of Management at any stage. |

SECTION 4 – RULES ON MINIMUM AGE FOR ENTRY INTO SECONDARY SCHOOL

Under section X of the Department of Education and Skills' Rules and Programme for Secondary Schools 2004/05, "A recognised pupil means a pupil who is not less than 12 years of age on the 1st day of January of the school year." Also, section V requires a Principal to obtain a "certified extract from" the "public register of births." Therefore, the school requires sight of the child's birth certificate in order to assess whether s/he meets the requirement.

Please tick the box to confirm that you enclose the child's original long-form birth certificate and a photocopy of same with this Application Form:

- I enclose the child's original long-form birth certificate and a copy of same with this Application Form. (The original will be returned to you.)

SECTION 5 – ASD Unit

*The ASD Unit in Bridgetown College teaches students who have one or more of the following special educational needs: [Autism Spectrum Disorder, Asperger Syndrome]
Please complete **ONLY** if you are applying for a place in the ASD Unit.*

Please tick if you are applying for a place in the ASD unit.

Where the student is seeking a place in the special class, please provide details of the special educational needs of the student, including an Educational/Clinical Psychologist's report.

SECTION 6 – APPLICATIONS TO OTHER SCHOOLS

Failure to complete this section may result in the offer of a place in Bridgetown College being withdrawn, in accordance with the Education (Admission to Schools) Act 2018.

| <i>Please tick as appropriate</i> | | <i>If yes, you are required to provide details</i> | |
|---|-------------------------------------|--|--|
| Is the student awaiting an offer of admission from another school(s)? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| Has the student accepted an offer of admission for another school(s)? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |

DATA PROTECTION

The Board of Management of Bridgetown College is a committee of WWETB, Ardavan Business Park Ardavan, Wexford which is a data controller under the General Data Protection Regulations and the Data Protection Acts 1988 - 2018. The Data Protection Officer for WWETB is Fintan O'Reilly and can be contacted at Data Protection Office at WWETB, Ardavan Business Park, Ardavan, Co. Wexford Y35 P9EA, Ph: 053 91 23799

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 WWETB is subject. In addition, under section V of the Department of Education and Skills' Rules and Programme for Secondary Schools 2004/05, a Principal is required to obtain a "*certified extract from*" the "*public register of births*" in relation to students. Therefore, the school requires sight of the child's long-form birth certificate. The processing of the personal data supplied on this Application Form is therefore carried out in line with Articles 6(c) and 6(e) of the General Data Protection Regulation.

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 WWETB 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 WWETB's Records Management Policy, which can be found at www.waterfordwexford.etb.ie

A copy of the full WWETB Data Protection Policy is available at www.waterfordwexford.etb.ie or from the school office.

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 WWETB 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.

IMPORTANT INFORMATION:

- You are required to submit:
(i) An original long birth-certificate (together with a copy), and
- 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.
- Please sign below to demonstrate that you have read and understood this information.

NOTE: Should the student receive a place in Bridgetown 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) _____

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