

THE HAROLD SCHOOL GLASTHULE APPLICATION TO ENROL-ASD SPECIAL CLASS 2024/2025

This is an Application Form for enrolment and does not constitute an offer of a place, implied or otherwise. Incomplete Application Forms will not be considered.

Chairperson BOM: Mr. Pat McKenna	Roll No. 20141G	
Principal: Ms. Dervla Nic Mhathúna	Website: www.theharoldschool.ie	
Pupil First Name:	Pupil Surname:	
Pupil PPS No:	Date of Birth:	
Address:	EIRCODE:	
Parent/Guardian 1:	Parent/Guardian 2:	
Email:	Email:	
Contact No:	Contact No:	
Sibling(s) Currently Attending The Harold School:		
Pupil's previous School/Educational setting (if any):		
Name of School:	Reason for Transfer:	

Completed Application for Enrolment forms (hard or soft copy) should be submitted with relevantdocumentation to The Admin Secretaryon and from Wednesday 8th May to Wednesday 22ndMay at 2.30 pmAny Completed forms received after that date/time will be considered as 'LATE'

The following items must accompany the form:

- All Applicants: Copy of child's Birth Certificate (with a certified translation if the language of the certificate is not Irish or English.)
- All Applicants: a full current Psychological & Cognitive Assessment, which must specify a diagnosis of 'Autism' i.e. DSM-IV or V or ICD-10 and a recommendation for a placement in an Autism Class in a mainstream school
- <u>Category 1 Glasthule Parish applicants ONLY</u>: Two of the following Recent (within 8 weeks) Utilities Bill, correspondence from Bank, Government Department etc.

<u>All of the information provided in this Application for Enrolment Form is taken in good faith. If any of the information is incorrect, misleading or if documentation is incomplete, then your application may be rendered invalid and any offer of a place made regarding your child will be cancelled (even if you have accepted it.)</u>

Declaration:

I have read the School Admission Policy (as available on <u>www.theharoldschool.ie</u> or from the Secretary's Office). I acknowledge that the only entitlement to an offer of a place is through the application of the criteria and requirements set out in this Policy. I confirm that all the information given in this form and in any accompanying documents is true, accurate and complete. I promise that I will bring any change in any information, up to and including 24th May 2024, to the attention of the School in writing as soon as I am aware of the change.

Signed:		Signed:	
	Parent/Guardian 1	-	Parent/Guardian 2
Date:		Date:	