

Application Form for Entry 2024/2025

CBS Roscommon Secondary School

Abbeytown, Galway Road, Roscommon F42 V273

Website: www.cbsroscommon.ie Email: info@cbsroscommon.ie

Telephone: 090 - 6626496

This is an application form for admission and does not constitute an offer of a place, implied or otherwise

- The deadline for accepting completed application forms is between October 26th & November 17th 2023 by 4.00pm
- Applications received after 17th November at 4.00pm will be treated as late applications please refer to our Admission Policy www.cbsroscommon.ie
- The information requested on this form is required. The legal basis for the questions contained in this form is specified in our Admissions Policy. All of the information that you provide on this application will be treated confidentially and in line with the school's Data Protection Policy available on www.cbsroscommon.ie

For office use- Date & time received / School Stamp:

Student's Personal Details

Surname:

Address:

Please complete this form in BLOCK CAPITALS

Eircode	
Date of Birth:	Country of Birth:
PPSN	
School curr	ently attending
Name	
Roll No	Telephone No
Address:	

First name:

Parent /Guardian Details								
PARENT/GUARDIAN 1	PARENT GUARDIAN 2							
Ms/Mrs/Mr	Ms/Mrs/Mr							
First Name	First Name							
Surname	Surname							
Address	Address							
(If different to above)	(If different to above)							
Eircode	Eircode							
Tel(Home)	Tel(Home)							
Mobile No	Mobile No							

Prior links to CBS Roscommon Secondary School (if any)								
	Name/s	Years attended						
Has the applicant any brother(s) currently in CBS Roscommon?								
Has the applicant any brother(s) a past pupil of CBS Roscommon?								
Is the applicant's Father a past pupil of CBS Roscommon?	Father's Name:							
Is the applicant's parent a staff member of CBS Roscommon?								

Please note: The school will communicate with parents predominantly be email, so please ensure that you have supplied a working email address that is checked daily

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Primary contact (Parent/Guardian 1):									(Name)																
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Seco	nd con	tact	(Pare	ent/0	Guar	diar	2):						(Na	me)											
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Any personal data provided on this form will be used to (i) identify a student and communicate with their parents/guardians (ii) process an application in line with the school's admissions criteria (iii) confirm the offer of a place where an application is successful. The information will be retained for an appropriate period thereafter to address any potential queries arising from the application process (or added to the student's school file in the case of successful applicants).

Parental Receipt Form



Application form for First Year 2024 Receipt

If you require a receipt of application to be sent to you please complete the form below fully together with a **stamped addressed envelope**. No receipts will be issued otherwise.

1.	Name of Student:	
2.	Home Address:	
3. I	resent School Attending:	