



Nano Nagle College

Principal: Adrian Gibbs
Deputy Principal: Mary O'Connell

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Student Application Form

Tick as appropriate: Mainstream Special Class

Please use BLOCK CAPITALS when completing this form.

Child's Details

Surname: _____ First Name(s): _____

Address: _____

Eircode: _____

Telephone No.: _____

Date of Birth _____ P.P.S. Number: _____

Mother's Name: _____ Father's Name: _____

Mother's Maiden Name: _____ Nationality: _____

Mother's Mobile No: _____ Father's Mobile No: _____

Mother's Email: _____ Father's Email: _____

Guardian information (if applicable)

Name: _____

Address: _____

Mobile No: _____ Other contact No: _____

Medical Information

Family Doctor: _____ Phone No.: _____

Medical Card Yes No

Medical Information: _____

Dietary Requirements/Allergies (if any):

Family members **Currently** in this School:

Name: _____ Class: _____

Name: _____ Class: _____

Family members **Previously** in this School:

Name: _____ From: _____ To: _____

Name: _____ From: _____ To: _____

Primary School Attended: _____

Name of Teacher (6th Class): _____

Position in Family: _____

Signed: _____ (Mother) _____ (Father)_

Date: _____ Date: _____

Additional Contact Person

1. Name: _____ Contact No. _____

Relationship to child: _____

It is **essential** that the following documentation is returned with the completed Application Form:

- The **original** long form Birth Certificate

If applying for the Asd Class the following documentation will also be required:

- ❖ An **original** Clinical diagnostic report which proves the applicant meets DSM IV/V or ICD 10 diagnostic criteria.
- ❖ An Educational assessment which includes an estimation of cognitive function.
- ❖ A speech and language assessment (within the last 2 years).
- ❖ An occupational therapy assessment (within the last 2 years).
- ❖ All reports and information from any support services involved with the student.
- ❖ A recommendation (within the last 2 years) that a Special class place in a mainstream post primary school setting is essential.