



# St. Vincent's Secondary School

SCOIL NAOMH UINSIONN,  
GLASNAION,  
ATH CLIAITH 11.

GLASNEVIN, DUBLIN 11.  
Tel: 830 4375  
Fax: 830 9727  
Principal: MS. M. QUINN  
Deputy Principal: MR. N. McCANN

(It is essential that all the information requested on this form be supplied, otherwise the application will not be processed)

Student's Surname: \_\_\_\_\_

Student's First Name: \_\_\_\_\_

Student's P.P.S. Number: \_\_\_\_\_

Date of Birth : \_\_\_\_\_

Home Address: \_\_\_\_\_

\_\_\_\_\_

Intended Date of Entry: August 20\_\_\_\_\_

Intended Year of Entry: 1<sup>st</sup> Yr. 2<sup>nd</sup> Yr. 3<sup>rd</sup> Yr. 4<sup>th</sup>Yr. 5<sup>th</sup> Yr. 6<sup>th</sup>Yr. (Please circle appropriate year)

Contact Phone No. during School Hours:

\_\_\_\_\_ Relationship to student: \_\_\_\_\_

\_\_\_\_\_ Relationship to student: \_\_\_\_\_

Parent/Guardian email Address: \_\_\_\_\_

Home Phone No: \_\_\_\_\_

Nationality: \_\_\_\_\_

Religion: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Occupation: \_\_\_\_\_

Mother's Maiden Name: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Occupation: \_\_\_\_\_

No. of children in family: \_\_\_\_\_ Student's place in family: \_\_\_\_\_

Number of sisters: \_\_\_\_\_ Number of brothers: \_\_\_\_\_

Brothers currently in this school: \_\_\_\_\_

Brothers who have gone to this school and years when they attended:

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Previous school attended (including dates):

(1) \_\_\_\_\_

(2) \_\_\_\_\_

Medical Conditions of which the school should be aware:

(1) \_\_\_\_\_

(2) \_\_\_\_\_

I/we as parent/guardian of \_\_\_\_\_ consent to the principal of his previous schools to release appropriate and relevant information to the principal of St Vincent's Secondary School, Glasnevin, pertaining to our son in the event that they are contacted by the said principal.

Signature of Parent(s)/ Guardian(s) \_\_\_\_\_

\_\_\_\_\_

Student's signature: \_\_\_\_\_

Date: \_\_\_\_\_

Please return completed Application Form together with Full Birth Certificate (not Baptismal Certificate) to:

The Secretary  
St Vincent's Secondary School  
Finglas Road  
Glasnevin  
Dublin 11

The School's Admission Policy and Code of Behaviour are available on the school website <http://stvincentsd11.ie> or can be provided in hard copy on a specific request to the school.

After an initial offer of places, Parents/Guardians will have a two week period in which they accept the place offered with the payment of a school Amenity Fee of €120 (If the payment of this fee is too great a financial hardship please make an appointment to discuss the matter with me and don't allow it to be a cause of your son not accepting his place)

#### SELECTION CRITERIA

Places will be allocated to new first year student applicants in accordance with the criteria and procedures set out in this Admissions Policy.

1. Brothers of students already in the school
2. Brothers of past pupils
3. Sons of past pupils
4. Sons of members of teaching staff of St. Vincent's
5. Boys from St Vincent's primary school who apply within the established criteria and procedures.
6. Any remaining places will be offered on a randomly selected basis by public lottery (see below).
7. Once all available places have been allocated a waiting list will be established through the public lottery.

The public lottery will be conducted in the following manner.

All names will be placed in a drum.

Places or position on the waiting list will be determined by the order of draw.

It will take place in the school at a time and date which will be communicated to the persons involved.

An independent arbitrator (e.g. Garda, priest etc.) will supervise and sign off the draw for fairness and transparency.

Students who apply after the closing date will be placed on the waiting list in order of the date on which they apply and after any applicant on the list from the lottery draw.

A boy placed on the waiting list is not in any way guaranteed a place in the school.

*Application Forms are available by calling to, or telephoning, the school office, or from your primary schools.*

*Late applications will only be considered after all applications received in time have been processed*

**For Office Use Only**

Date application received.....

Birth Certificate enclosed.....

**For Office Use Only**

**Date**

**Action Taken**

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