Kilkenny Church of Ireland National School

The Model School, Castlecomer Road, Kilkenny R95 XA66

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Website: www.kilkennymodelschool.net
Roll. 17218v

TRANSFER APPLICATION FORM 2026/2027

*Submission of this application form does not confer a right to admission nor does it guarantee a place in the school. Applications **must not** be submitted prior to the commencement of the application period as per our Admissions Notice.*

Please complete this form using **BLOCK CAPITALS**

Applicant Student's Details

Child's name in full (*as per birth cert*): _____
Name by which pupil is generally known: _____

Date of Birth of Pupil: _____ Sex: _____
*Please enclose **copy** of your child's Birth Certificate.*

Present postal address of pupil: _____
_____ Eircode: _____
We require a utility bill (dated within 3 months) for proof of address e.g. Electricity/Telephone etc.

Parents'/Guardians' Details:

Parent name in full: _____
Address: _____
_____ Eircode: _____
Contact number: _____
Email address: _____

Parent name in full: _____
Address (if different from above): _____
_____ Eircode: _____
Contact number: _____
Email address: _____

Mother's Maiden Name (if applicable) _____

Transfer Details:

I hereby apply for a place for my child in:_____ Class
Name and address of current school _____
_____
Principals Name: _____ Telephone No. _____
Current Class_____
Reason for Transfer: _____
_____
Required date of entry to Kilkenny Model School _____

Category for Enrolment (as per Admissions Policy):
Please tick the appropriate category –

Priority Category 1 *(member of the Church of Ireland or a Protestant reformed church or is a member of a minority religion which has the same religious ethos within Parish boundaries)* ☐

Priority Category 2 *(Siblings not in Priority Category 1)* ☐

Priority Category 3 *(Other applicants within Parish boundaries)* ☐

Priority Category 4 *(All other applicants)* ☐

THIS SECTION IS FOR PRIORITY CATEGORY 1 APPLICANTS ONLY:
If you wish to be placed in Priority Category 1 please complete section (a) and (b) below. This is compulsory for consideration in this category*.

(a) Statement confirming membership of a minority religion.
I/We confirm that the applicant student is a member of the minority religious denomination named below in section (b). We support the Ethos of this Church of Ireland School and wish for our child to be educated in a school that provides a programme of religious education which is the same or has a similar Ethos to the minority religion named below in section (b).

Signed: _____ (Parent's signature) Date _____

Signed: _____ (Parent's signature) Date _____

(b) Religious Denomination of applicant pupil: _____
Name of your Religious Leader: _____
Address: _____
Contact No.: _____
Email: _____

We require either a signature of the Religious Leader or a letter/email from the Religious Leader.

I. Signature of Religious Leader:
_____
Official Stamp-

or

II. A letter/email from the religious leader confirming that the applicant pupil is a member of the minority religion as stated above.

The Board reserves the right to seek further information if required.

If accepted for entry-

I hereby undertake for myself and for my child;

- To abide by the rules and regulations of the School made and to be made
- To accept the terms of the Code of Behavior and Admissions Policy which I have received and read. I will co-operate with staff and support the Ethos of the school.
- To confirm that all the information on this form is correct and accurate.

In registering this application for _____to enter _____ (class) in Kilkenny Church of Ireland National School (The Model School) in the academic year **2026/2027,** I/we understand this registration places the pupil on a list of applicants for the year stated.

I/We understand that this DOES NOT GUARANTEE A PLACE FOR OUR CHILD EITHER FOR THE YEAR REQUESTED or for any other year.

The school will inform you, within 21 days of the deadline on receipt of this completed form, of the success or otherwise of the application.

Where possible both Parents/Guardians should sign below:

(1). _____ (2) _____

Parent/ Guardian Parent/Guardian

Date: _____

Checklist of accompanying documentation:

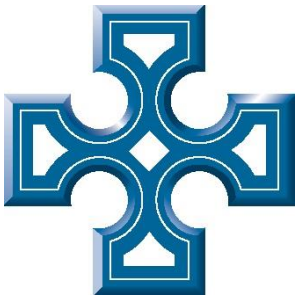
1. Copy of Birth Certificate ☐

2. Proof of address i.e. Copy of Utility bill etc. ☐

3. Letter/email from Religious Leader (if applicable) for Priority Category 1 applicants ☐

Please ensure all sections of this form are complete.
INCOMPLETE APPLICATION FORMS WILL NOT BE CONSIDERED.
Please note that the submission of the Application Form early in the Admissions Application period is not a factor in the allocation of places in the school.

The Board of Management of The Kilkenny Church of Ireland N.S. (The Model School) wishes to clarify that enrolment at The Kilkenny Church of Ireland N.S (The Model School) for any child/ren does not of itself act as a ground for subsequent guarantee of enrolment at Kilkenny College.
The Model School is not a "feeder school" for Kilkenny College.
The Board of Management of Kilkenny College operates its own Admissions Policy for entry into Kilkenny College. This is available from the Kilkenny College office or website: www.kilkennycollege.ie



Principal: Olwen Mackey Patron: The Right Revd. A.Wilkinson Chairperson: Trevor Darlington