



St. Anne's Secondary School  
Application Form for Enrolment for 2026/2027



**Autism Spectrum (AS) Class**

**Student Details:**

<b>Surname</b> (as per birth certificate)	<b>First Name</b> (as per birth certificate)
<b>Permanent Address:</b>	<b>Preferred First Name:</b> <b>Date of Birth:</b> <b>Country of Birth:</b> <b>PPS Number:</b> <b>Religion:</b>
<b>Nationality:</b>	<b>Religion:</b>
<b>Primary School Attended:</b>	
<b>Secondary school attended</b> (if transferring from another Post-primary school)	

**Parent(s)/Guardian(s) Details:**

**Father/Guardian**

**Mother/Guardian**

Full Name:	Full name:
Email Address:	Email Address:
Permanent Address (if different from above)	Permanent Address (if different from above)
Mobile Phone Number:	Mobile Phone Number:

**Additional Information:**

Name of Family Doctor:	
Any additional relevant information:	

### **Application for Special Class Place:**

Applications for enrolment to the special class will be considered where the student meets the following criteria as set by the Department of Education and Youth:

- A psychologist or psychiatrist will have assessed and classified such students as having autism or autism spectrum disorder according to DSM-IV, DSM-V or ICD-10 criteria.
- Recommendation contained in professional report/letter that a place in a special class is required with rationale for same.
- Evidence of complex educational needs.

Parents/Guardians are required to provide documentary evidence to confirm that your child meets the criteria set out above. Parents/Guardians should also note that the provision of a place in a special class is subject to review as established by the National Council of Special Education (NCSE).

### **Declaration by Parent(s)/Guardian(s)**

#### **Please read carefully**

I/We accept the ethos and school rules as provided by St. Anne's Secondary, Tipperary and agree to support the implementation of the Code of Behaviour.

Signed: \_\_\_\_\_

Father/Guardian

Signed: \_\_\_\_\_

Mother/Guardian

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

\_\_\_\_\_

Where applicable both signatures are required.

**The closing date for receipt of completed application forms is 4pm on Friday 21<sup>st</sup> November 2025.**

**Please note the following documentation is required with this form:**

- Photocopy of Birth Certificate
- Professional Report stating that the special class placement is required for the child applying and rationale for same.