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| **Application for Exemption from the Study of Irish**  **Primary Schools**  **For completion by the parent(s)/guardian(s)** | | | |
| **Name of Pupil** | |  | |
| **Date of Birth** | |  | |
| **Class** | |  | |
| **Name of School** | |  | |
| I/We wish to apply for an exemption from the study of Irish on behalf  of\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Please indicate (✓) the grounds for an exemption from the study of Irish in accordance with Circular 0054/2022 | | | |
| **2.2.1(a)** | The pupil is not less than 12 years of age on the day of their enrolment or re-enrolment whose education was received outside the State (for a minimum period of three consecutive years) where he/she did not have the opportunity to engage in the study of Irish. | |  |
| **2.2.1(b)** | The pupil’s education was received outside the State (for a minimum period of three consecutive years) where he/she did not have opportunity to engage in the study of Irish and who is enrolling following the completion of the full course of primary education recognised by another State. | |  |
| **2.2.2** | The pupil has at least reached second class and experiences significant literacy difficulties which are an obstacle to their learning across the curriculum and which are persistent despite having had access to a differentiated approach to language and literacy learning in all subjects/across the curriculum and over time and presents with a standardised score on a discrete test in either Word Reading, Reading Comprehension or Spelling at/below the 10th percentile. | |  |
| **2.2.3** | The pupil has at least reached second class and experiences a high level of multiple and persistent needs, that persist despite targeted and individualised Student Support Plans to address those needs (over not less than two years) and which are a significant barrier to the pupil’s participation and engagement in their learning and school life and who been given every reasonable opportunity to participate in the learning of Irish in mainstream classes for as long as possible and the Principal is satisfied that the granting of an exemption is in the overall best interests of the pupil *concerned*. | |  |
| **2.2.4(ii)** | The pupil has a recommendation and has been deemed eligible for a place in a recognised special school and/or in a special class in a mainstream school | |  |
| **2.2.5** | The pupil’s parent(s)/guardian(s) is a/are diplomatic or consular representatives of another country to Ireland irrespective of age or educational history. | |  |
| Please provide detail of any supporting documentation being submitted to the schoolor the purpose of this application the documentation provided will be assessed, by relevant school personnel and other professionals where necessary, to determine whether there is grounds to grant an exemption from the study of Irish. Tick the box if you wish to proceed.    Signed:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Signed:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | |
| **For school use only**  **Date of receipt of application:** | | | |
| **Principal: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **School roll number**: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | | | |