



# XLc Project

W.S.T.C.Y.S, Manor Street Youth & Community Centre, Manor Street, Waterford.  
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## Application Form

Name: \_\_\_\_\_ Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ PPS No: \_\_\_\_\_

Phone No's: 1. \_\_\_\_\_ (Mobile) 2. \_\_\_\_\_ (Home)

E-Mail Address: \_\_\_\_\_ Med. Card No: \_\_\_\_\_

School last attended: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

Interests / Hobbies: \_\_\_\_\_

**Medical Details:** (e.g. Dyslexic/ADHD, Asthma etc.) \_\_\_\_\_

### Educational Details

Have you done the Junior Cert? \_\_\_\_\_

Did you pass 5 or more subjects? \_\_\_\_\_

How many of those were at higher level? \_\_\_\_\_

Have you done the Leaving Cert? \_\_\_\_\_

Did you pass 5 or more subjects? \_\_\_\_\_

How many of those were at higher level? \_\_\_\_\_

### Parental Consent (Required only of those 15 years or younger)

I give \_\_\_\_\_ permission to join and participate in the programme and activities of the XLc Project.

Signature: \_\_\_\_\_ Parent ( ) Guardian ( )

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

If you are 15 years or younger **Parental Consent** is required and the school attendance officer must approve your application.

School Attendance Officer: Signed \_\_\_\_\_

### Referral:

Referred By: \_\_\_\_\_ Tel: \_\_\_\_\_

### Interview:

Interviewed By: \_\_\_\_\_

### Office Use Only

L.C.

J.C

5<sup>th</sup>

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

