**Rathmore Grammar School**

**CERTIFICATE OF VERIFICATION 2024**

**[For Criterion (iii) only]**

**Notice to Parents:** Before allocating a child to group **(iii)** of its Admissions Criteria the School must receive this Certificate verifying the child’s status.

**You only need the Certificate of Verification for criterion (iii).**

**Section A** should be completed and signed by a parent and **Section B** should be completed and signed by one of the following who is not related to the child by birth or marriage: School Principal/Vice Principal, Doctor, Member of Clergy, Lawyer, Police Officer or Elected Public Representative (“the Verification Signatory”).

**Failure to have the certificate duly completed, signed and uploaded with the online Transfer Application will result in the child being allocated to group (iv) of the Criteria.**

Please use **block capitals** when completing the Certificate.

**SECTION A**

Child’s Surname **………………………….……….** Forename(s) **…….…………………………….......** DOB **……. / ……. / …….**

Parent’s Surname **…………………………………...................** Forename(s) **………………………………………………….**

**Statement by Parent** - I confirm that my child is: **(Tick only one box)**

|  |  |  |
| --- | --- | --- |
| The **only child / eldest child** of the family. |  |  |

|  |  |  |
| --- | --- | --- |
| The child has no other siblings who achieved a Grade A in a previous GL Transfer Assessment. |  |  |

|  |  |  |
| --- | --- | --- |
| The brother or sister of the eldest child in the family who achieved Grade A in the GL Assessment and previously applied to Rathmore but was not selected.  |  |  |
| Name of Eldest Child: **………….……………..……………….……………….……………** Year of Transfer / GL Assessment:  **.……………..** |

**Signature of Parent**  **………………….………………………………………….………** **Date** **……. / ……. / …………….**

**SECTION B**

**Notice to Verification Signatory:** In allocating a child to a group as above the School will be relying upon your verification of the child’s status and may contact you to confirm that you have so certified.

|  |  |
| --- | --- |
| **Statement by Verification Signatory:** I confirm that I have known the above family for **(Enter number**  |  |
| **of years)** and certify to the best of my knowledge, information and belief that the information provided by  |  |
| the parent is correct. |  |

Name …………………………………………........................ Occupation ………………………..………………………………..

Professional Address ………………………………………………………………………………………………….

Contact Telephone No(s) ….………………………………………………………………………………………….

**Signature of Verification Signatory** ……………………………….…………………………… **Date ……. / ……. / ……….**