

Mata sa Rang Application Form

MODULE 2

Laois Education Centre

School Information:

School Name: _____

School Address: _____

E-mail Address: _____

School Roll No: _____

School Phone No: _____

Principal's Name: _____

Mobile number: _____

Principal's signature: _____

Information relating to participating teacher:

Name: _____

Post in 2019/2020: _____

Teaching Council Number: _____

Mobile Number: _____

Email Address: _____

Please return completed form/s along with course fee by Friday 8th November 2019

The information collected on this application form will be used solely for the purpose for which it was collected.