

# ***Mata sa Rang* Application Form**

## **MODULE 1**

(Sligo Education Centre commencing **Monday 5<sup>th</sup> November** from 4.00p.m to 7.00p.m)

### **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 2018/2019:** \_\_\_\_\_

**Teaching Council Number:** \_\_\_\_\_

**Mobile Number:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

***Please return to Sligo Education Centre, I.T. Campus, Ballinode, Sligo on or before Monday 24<sup>th</sup> September, with the appropriate fee so kits can be purchased in time for commencement of workshops.***

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