

***Mata sa Rang* Application Form**

MODULE 1

(Sligo Education Centre commencing **Tuesday 17th April** 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 2015/2016: _____

Teaching Council Number: _____

Mobile Number: _____

Email Address: _____

Please return to Sligo Education Centre, I.T. Campus, Ballinode, Sligo on or before Friday 9th March, 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.