

DLF Seminars - Sligo Education Centre

**Please complete this form and return it in the enclosed envelope
on or before Wednesday October 10th**

School Name _____

Roll No: _____

Teachers Attending from your school

Principal _____

Email: _____

Teacher _____

Email: _____

**Please Note:
All correspondence in relation
to the upcoming DLF Seminars
will be to the email addresses
supplied**

We wish to attend the DLF seminar on

(please tick appropriate box with your date preference in order)

December 5th	9.30am – 3.30pm	
December 12th	9.30am – 3.30pm	

The Department of Education and Skills will provide substitute cover where required.

Signed by Principal _____

Date: _____