



Application form for Partnership Schools Ireland Training

Name of School: No in School: Total / Male / Female

School Address:

Diversity (%):

Telephone Number: Special school/ or Special Designation:

School Roll Number:

Name of Principal:

Telephone Number of Principal:

Email Address:

Name of PSI Lead: (usually not chosen until after first session)

Telephone Number:

Email Address:

Signature of Contact:.....

Date:

Please return form to: The Training & Development Unit,
National Parents Council Primary, 12 Marlborough Court,
Marlborough Street, Dublin 1.
Or Email: psi@npc.ie Fax: (01) 887 4489

