

MAYO, SLIGO AND LEITRIM EDUCATION AND TRAINING BOARD



DRUMSHANBO VOCATIONAL SCHOOL

Application Form for Post Leaving Certificate Course 2016/2017

Please note that these courses are intended for persons of Leaving Certificate standard or its equivalent. They are open to Adults and Post Leaving Certificate pupils. A limited number of places on each course may be provided for unemployed adults under the V.T.O.S. Scheme.

Title of Course: \_\_\_\_\_

Details of Applicant (BLOCK CAPITALS Please)

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Contact No.: \_\_\_\_\_

Nationality: \_\_\_\_\_ Medical Card (if applicable):  
Number \_\_\_\_\_ Expiry \_\_\_\_\_

Email address (please print): \_\_\_\_\_

Education

(a) Name of last school attended and reference from same \_\_\_\_\_

(b) Dates of attendance: From \_\_\_\_\_ To \_\_\_\_\_

(c) PPS No.: \_\_\_\_\_

(d) Name & date of last exam completed \_\_\_\_\_  
(if seeking exemption from QQI exams copies must be attached of modules completed)

(e) **N.B. Birth Cert and Photographic Identification must accompany this application.**

Work Experience

(Please give brief details of wholtime employment within past 2 years e.g. Employer's name, contact number and type of work)

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Please give details of any medical /allergies / other conditions or special requirements that we should be aware of.

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I wish to apply to Mayo, Sligo & Leitrim E.T.B. for a place on the above course. Completed application form should be returned to: The Principal, Vocational School, Drumshanbo, Co. Leitrim.

Signed: \_\_\_\_\_

Date: \_\_\_\_\_