

Statement of Attendance Form for School Year 2017 / 2018

To be completed by the Parent/Guardian at the end of each school term/year.

(Please note that an application for school transport must precede a request for grant assistance).

Name of Pupil: _____

Address: _____

Full name and address of parent/guardian who provided transport:

Supplier No. (if known): _____

Signed/Date: _____

To be completed by School Principal.

Primary ___ **Post Primary** **Special School** ___ **Special Class** ___ (please tick).

School Name & Address:

Gaelcholáiste Luimnigh, Meal Sior Anraí

Roll No: 76101 i

Attendance record of pupil during above school year.

Period.	No. of days school open.	No. of days pupil attended.

I confirm that the above information is correct and in accordance with our school records.

Signed: _____ **Principal**

Date: _____

Please return completed form to the above address.

School
Stamp