

## Finn Valley College

Drumboe Lower, Stranorlar, Co. Donegal Tel. 074 9131684 E: finnvalleycollege@donegaletb.ie

#### PLC Course - Business Administration 5M2468

Applicant's Surname Address		
 Tel: Email		
PPS No Card		Medical
Mother's Name Mother's maiden name		
Father's Name	Tel:	

**Educational History** 

Name of school where LC/LCVP/LCA sat (and Year)	School: Year:
Other relevant educational experience	

#### **Educational Attainment**

Programme	LCVP / LC / LCA / Other		
Subject	Level	Grade Obtained	





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### My Choice of Course

Reasons why I chose this course:

### College / Career Goals

College Course / Career you intend to pursue				
Work Experience (Please list below any work experience relevant to your application)				
Name of Employer	Nature of duties	Duration of Employment		

Achievements (Both in and outside of school)

Interests / Hobbies

### Additional Educational needs

Did you have (or do you currently have) any additional educational needs that might require that Finn Valley College seek to put in place additional supports for you? This might include physical, health or learning difficulties or other needs that you feel we should be aware of.



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#### Other relevant information

#### **Declaration of Consent**

I \_\_\_\_\_\_ have read and understood the Finn Valley College PLC Enrolment policy. I hereby agree to adhere to the terms of the PLC Enrolment policy and the Finn Valley College Code of behaviour.

I also undertake to adhere to the PLC Attendance policy.

I understand that I will be required to undergo the vetting procedure operated by Donegal ETB. I confirm that there is no reason to the best of my knowledge why there would be any difficulty with this vetting process.

I do / do not want my parents / guardians informed of my progress, attendance and attainment. (Please score out that which does not apply)

Signed \_\_

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

Date	2			

Date\_\_\_\_\_

Signed \_\_\_\_\_\_

Parent / Guardian if Applicant not over 18