School Transport Section
Department of Education & Skills
Portlaoise Rd.
Clonminch
Tullamore
Co. Offaly
R35 Y2NS
05793-25466/7

Statement of Attendance Form for School Year 20 __/20 __

(Please note that an application for school t		•	
Name of Pupil:			
Address:			
Full name and address of parent/g	uardian who provided transport an	d to whom payment should be made	
Supplier No. (if known):	~~~~~	~~~~	
To be completed by School P Primary Post Primary Special Sch	nool Special Class (please tick).		
School Name & Address:			
Roll No:			
Attendance record of pupil during	above school year		
Period.	No. of days school open.	No. of days pupil attended.	
I confirm that the above informat	ion is correct and in accordance w	ith our school records.	
Signed: Princip	pal [
Date:		School	
Please return completed form to the	e above address.	Stamp	

The Department of Education and Skills, as far as practicable and having regard to the resources available, provides for education and training for people resident in the State at a level appropriate to meet the needs and abilities of those people. The Department requires the above personal data in order to allocate funding towards the cost of organising private transport arrangements. The privacy notice outlining further information in relation to this form can be found at www.education.ie. Full details of the Department's data protection policy setting out how we will use your personal data or that of your child's data as well as information regarding your rights as a data subject are available at https://www.education.ie/en/The-Department/Data-Protection/. Details of this policy and privacy notice are also available in hard copy from the following address upon request: Data Protection Officer, Department of Education and Skills, Comamaddy, Athlone, Co. Westmeath N37 X659.