

CRESCENT COLLEGE COMPREHENSIVE S.J.

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Parents'/Guardians' Name(s):	e for the school year 2019/2020.
Parents'/Guardians' Name(s):	
Address:	
Гelephone Number:	
Student(s) Name(s):	
	Class/Year
	Class/Year
	Class/Year
Please tick $\Box$ the reason for application:	
Medical Card Holder 🗖 Medical Card N	lo: Renewal Date: (Attach Copy of C
Back to School Allowance Scheme 🗖 (Att	ach Letter)
<ul> <li>A book grant scheme is in operat</li> </ul>	tion for all students.
<ul> <li>Books should be kept clean and r</li> </ul>	neat and should be returned to school at the end of the school year.
	conditions -The following terms and conditions apply to the scheme:
	er the scheme will remain at all times the property of the school. They v at any time by a member of the teaching staff.
	aged, they must be replaced by the student. Full compensation for lost
books will be required b	eme is at the discretion of the Principal. Any student found to be abusing
<ul> <li>books will be required b</li> <li>Membership of the sche</li> <li>defacing or disposing of</li> </ul>	rented books will be dismissed from the scheme and will be required to
<ul> <li>books will be required b</li> <li>Membership of the sche</li> <li>defacing or disposing of</li> <li>supply their own books</li> </ul>	
<ul> <li>books will be required books will be required books</li> <li>Membership of the schedefacing or disposing of supply their own books</li> <li>Books supplied under the books</li> </ul>	frented books will be dismissed from the scheme and will be required to for the remainder of their time in school. The scheme may be new or second hand at the discretion of the Principal. BY WEDNESDAY, 19 <sup>TH</sup> JUNE 2019. NO LATE ENTRIES WILL BE ACCEPTED. GRANT ON

DATE APPLICATION RECEIVED:

SCHOOL PRINCIPAL