MOBILE PHONE POLICY ACCEPTANCE FORM 2020/2021

Name: _____

Year: _____

Has read the Mobile Phone Policy of Presentation Secondary School Listowel and has discussed it with my parent(s)/ guardian(s).

I will abide by it fully.

Signed: _____

Date: _____

I/we, the parent(s)/guardian(s) of _____

have read the Mobile Phone Policy with _____. We accept that she is enrolled into the school in accordance with the terms of the Policy.

Signed: _____

Date: _____

PLEASE EMAIL THIS FORM TO RECEPTION@PRESLISTOWEL.IE