

Booking/Expression of Interest Form

Programme Interest

Which programme is your school interested in? Road to Resilience ☐ Building Resilience ☐

School Details

School Name _____

School Address _____

City _____ County _____ Eircode _____

Principal's Name _____

Has your school been designated as disadvantaged? Yes ☐ No ☐

Does your school have any half days? Yes ☐ No ☐ If yes, specify which days? _____

School Contact

School Contact Name _____

Position at School _____

Email _____ Phone Number _____

School Programme

Has your school previously received a Resilience Academy Programme? Yes ☐ No ☐

Please indicate how many classes and students you will be delivering the **Road to Resilience** to?

1 st Years	2 nd Years	3 rd Years
Classes:	Classes:	Classes:
Students:	Students:	Students:

Gender: Male _____ Female _____ Mixed _____

Please indicate how many classes and students you will be delivering **Building Resilience** to?

1 st Years	2 nd Years	3 rd Years	TY	5 th Years	6 th Years
Classes:	Classes:	Classes:	Classes:	Classes:	Classes:
Students:	Students:	Students:	Students:	Students:	Students:

Gender: Male _____ Female _____ Mixed _____

Do any students have any special needs? Yes ☐ No ☐ If yes, please provide more details: _____

Are there any issues that we should be aware of? E.g. bullying, self-harm, gender transitioning? Yes ☐ No ☐

How many teachers will be involved in the delivery of the programme? _____