

# Student Grant Application Form 2010/11

- Higher Education Grants Scheme 2010
- Vocational Education Committees' Scholarship Scheme 2010
- Third Level Maintenance Grants Scheme for Trainees 2010
- Maintenance Grants Scheme for Students attending Post Leaving Certificate Courses 2010

CANDIDATE'S FULL NAME (in BLOCK LETTERS)

FOR OFFICIAL USE ONLY

Student Ref No:

## ■ CLOSING DATE: 31 AUGUST 2010 ■

We strongly recommend that you apply to your local authority or Vocational Education Committee (VEC) for a student grant as soon as possible after you apply for your full-time course. Do not wait until you have accepted a place in college or until the closing date to apply for a student grant.

It is important to note that you must apply to the local authority or VEC in your home area, not the area where the college is located.

Please read the Guidance Notes for Completing the Student Grant Application Form 2010/11 carefully before completing this form. The guidance notes contain necessary information and outline the documents which you must send us with this application form.

Depending on your circumstances, your local authority or VEC may agree to accept your student grant application after the closing date.

Please use **BLACK INK** and write in **BLOCK LETTERS**

Please answer **all questions**. If a question does not apply to you, please enter 'N/A' (not applicable). If a section does not apply to you, please enter 'N/A' clearly across the top of the section.

The following symbols appear throughout this application form:



means there is a detailed note in the **Guidance Notes** booklet to help you answer the question.




means your local authority or VEC need **documentary evidence** from you and you must send the relevant documents with this form. See the guidance notes for detailed information on documentary evidence.

If you need further advice or support filling in this form, **please contact the local authority or VEC in your home area**. You will also find more information about the student grant schemes on [www.studentfinance.ie](http://www.studentfinance.ie).

## Section A


## Candidate's personal details

A1. Your PPS No.: 

A2. Your title: Mr ☐ Mrs ☐ Ms ☐ Other: (please specify)

A3. Your surname:

A4. Your first name(s):


A5. Your first name as it appears on your birth certificate: 

A6. Your birth surname:

A7. Your mother's birth surname:


A8. Your date of birth:

A9. Your gender: Male ☐ Female ☐


A10. Your home address: 

A11. Your telephone numbers:  MOBILE  
 HOME


A12. Your email address:

A13. Which type of full-time course do you wish to pursue in the academic year 2010/11? (please tick ✓) 

Post-Leaving Certificate course	Level 5	<input type="checkbox"/>
Post-Leaving Certificate course	Level 6	<input type="checkbox"/>
Higher certificate	Level 6	<input type="checkbox"/>
Ordinary bachelor degree	Level 7	<input type="checkbox"/>
Honours bachelor degree	Level 8	<input type="checkbox"/>
Higher diploma or postgraduate diploma		<input type="checkbox"/>
Master's degree	Level 9	<input type="checkbox"/>
Doctoral degree	Level 10	<input type="checkbox"/>

A14. Your CAO number: 

or

Your UCAS No. (if applicable) 

## Section A

## Continued...

A15. Category of candidate:



**Note: Please read carefully the guidance notes on category of candidate and select one.**

Candidate dependent on parent(s)/legal guardian ☐

Mature candidate dependent on parent(s)/legal guardian ☐

Independent mature candidate ☐



A16. Are you: (please tick ✓)

Single (never married) ☐

Married ☐

Cohabiting ☐

Remarried ☐



Separated ☐



Divorced ☐

Widowed ☐

A17. On 1 January 2010, which category best described you?

Student ☐

Employed ☐

Self-employed ☐

Unemployed ☐

Retired ☐

Home duties ☐

Other (please specify)

A18. If you have not always been a student, what was your occupation?




## Section B

## Candidate's nationality, immigration status and residency details

B1. What country were you born in?



Ireland ☐ Elsewhere ☐

If Ireland, enter the county:

If elsewhere, enter the country:

B2. What is your nationality?




B3. If you are not an EU, EEA or Swiss national, on what basis are you staying in Ireland?



Date permission granted

a) Refugee

Yes ☐ No ☐

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

b) Subsidiary protection

Yes ☐ No ☐

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

c) Permission to remain under European Communities Free Movement of Persons Regulations and EU Directive (EU Treaty Rights provisions)

Yes ☐ No ☐

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

d) Permission to remain because of marriage to an Irish national or because you are the dependent child of such person

Yes ☐ No ☐

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

e) Humanitarian leave to remain granted before the Immigration Act 1999 came into effect

Yes ☐ No ☐

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

f) Permission to remain following a decision not to deport you under Section 3 of the Immigration Act 1999

Yes ☐ No ☐

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

## Section B

## Continued...

- B4. Have you been resident in Ireland for at least 3 of the last 5 years?



Yes ☐

No ☐

If Yes, go to **Section C**

If **No**, that is, if you have not been living in Ireland for at least 3 of the last 5 years, please fill in your residence details for the last 5 years in the space below.

**Note: If you need more space you can use the additional notes section on page 12 of this form.**

Full Address:

Why were you there?  
(for example, travel,  
work or study)

How long were you  
there?

From

To

## Section C

## Candidate's academic history and sources of student financial assistance

- C1. In what year did you, or will you, complete your Leaving Certificate or equivalent final school exam<sup>1</sup> for the first time?

- C2. Have you ever previously attended a course of further or higher education?



Yes ☐

No ☐

If No, go to **question C3**

If **Yes**, give details below of the **most recent** course you attended (even if you did not complete it):

a) Name of college:

b) Address of college:

c) Type of course:

Further education or PLC ☐

Undergraduate ☐

Postgraduate ☐

d) On what basis did you attend this course:

Full-time ☐

Part-time ☐

e) Title of course:

f) Qualification<sup>2</sup> you received  
and year you received it:

Year:

(if you have no qualification, write none)

<sup>1</sup>For example, A Levels, Baccalauréat and so on.

<sup>2</sup>Examples include FETAC level 5, FETAC level 6, certificate, higher certificate, diploma, ordinary degree, honours degree, higher diploma, postgraduate diploma, masters, PhD.

g) How long was the course?  year(s)

h) What was the start date of the course?

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

i) When did you leave or finish the course?

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

j) If you are currently attending this course, please tick which year you are in:

1st year ☐ 2nd year ☐ 3rd year ☐ 4th year ☐

k) Will you be continuing on the same course in 2010/11?

Yes ☐ No ☐

l) Have you attended or completed any other course of further or higher education? Yes ☐ No ☐

**Note: If Yes, please use the additional notes section on page 12 of this form to provide all of the information from (a) to (k) for each additional course you have completed or attended.**

**C3. Have you ever before applied for a student grant?**

Yes ☐ No ☐

If **Yes**, in which academic years did you apply?

Which local authority or VEC did you apply to?

**C4. Do you hold or have you ever held a student grant?**

Yes ☐ No ☐

If **Yes**, for which academic years did you get the grant?

Which local authority or VEC did you get it from?

**C5. Have you applied for or will you be getting a Back to Education Allowance (BTEA) or a Vocational Training Opportunities Scheme (VTOS) payment for the 2010/11 academic year?**



Yes ☐ No ☐

**C6. Have you applied for or will you be getting any other student financial assistance from Ireland or abroad for the 2010/11 academic year?**



Yes ☐ No ☐

If **Yes**, please give details of all awards/funds from the awarding/funding body or Department and the full amount, including fees, that you will get in 2010/11:

## Section D

### Personal details of your parent(s), legal guardian, spouse or partner

D1. PPS No:



D2. Surname:

D3. First name(s):

D4. Mother's birth surname:

D5. Current marital status:

Single (never married)

Married

Cohabiting

Separated

Divorced

Remarried

Widowed



D6. Home address:

D7. Telephone number:

MOBILE

HOME

MOBILE

HOME

MOBILE

HOME

D8. Employment status:

Employed

Self-employed

Unemployed

Retired

Student

Home duties

Other (please specify)

D9. Occupation:



	Father or legal guardian <input type="checkbox"/>	Mother or legal guardian <input type="checkbox"/>	Spouse <sup>3</sup> or partner (as applicable) <input type="checkbox"/>
D1. PPS No:			
D2. Surname:			
D3. First name(s):			
D4. Mother's birth surname:			
D5. Current marital status:			
Single (never married)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Married	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cohabiting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Separated	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Divorced	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Remarried	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Widowed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D6. Home address:			
D7. Telephone number:			
	MOBILE	MOBILE	MOBILE
	HOME	HOME	HOME
D8. Employment status:			
Employed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Self-employed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Unemployed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Retired	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Student	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Home duties	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (please specify)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D9. Occupation:			

<sup>3</sup>Spouse means each person of a married couple who are living together, or a man and woman who are not married to each other but are cohabiting as husband and wife. If you are applying as an independent mature candidate and you have a spouse or partner, your spouse or partner must complete this section of the form.

## Section E

## Details of dependent children

- E1. List other dependent children of your parent(s) or legal guardian or, if you are applying as an independent mature candidate, list your own dependent children.**



Please give details below of dependent children (including foster children) who, on 1 October 2009, were in the following categories:

- (a) under 16 years of age;
- (b) 16 years of age or over and in full-time education;
- (c) medically certified as permanently unfit for work.

Surname	First name	Date of birth	Category of dependent child: (a), (b) or (c)	School or college this child attended in 2009/10 (if applicable)	Relationship to the candidate
		DD/MM/YYYY			
		DD/MM/YYYY			
		DD/MM/YYYY			
		DD/MM/YYYY			
		DD/MM/YYYY			
		DD/MM/YYYY			


- E2. Please give details of the children listed above who, in the 2010/11 academic year, will attend a full-time third level course, Post-Leaving Certificate course, Garda training, Fáilte Ireland or Teagasc course or a full-time course of further education in Northern Ireland.**



Surname	First name	College student will attend in 2010/11	Course title	Year of course this student will be in for 2010/11	Has this student applied for a student grant?	Awarding grant authority (if applicable)


## Section F

## Reckonable income

- F1. Were you employed in 2009 on a full-time, part-time or temporary basis?** 


If **Yes**, enter the total gross income from all employments including any benefit-in-kind in 2009.

Candidate	Father or legal guardian	Mother or legal guardian	Spouse or partner (as applicable)
Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
€	€	€	€

- F2. Did you receive any social welfare payments in 2009 other than child benefit?** 


If **Yes**, list the name of the payment(s) and enter the total gross amount received from 1 January 2009 to 31 December 2009.

Candidate	Father or legal guardian	Mother or legal guardian	Spouse or partner (as applicable)
Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
€	€	€	€

- F3. Did you receive a payment from any other government department or state agency, for example, the Health Service Executive (HSE), FÁS or a local authority in 2009?** 

If **Yes**, list the name of the payment(s) and enter the total gross amount received from 1 January 2009 to 31 December 2009.

Candidate	Father or legal guardian	Mother or legal guardian	Spouse or partner (as applicable)
Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
€	€	€	€

- F4. Were you self-employed or engaged in farming in 2009?** 

If **Yes**, enter the adjusted profit or loss for income tax purposes for the 2009 tax year.

Candidate	Father or legal guardian	Mother or legal guardian	Spouse or partner (as applicable)
Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
€	€	€	€



## Section F

## Continued...

- F5. Did you have rental income from any of your land or properties in Ireland or abroad in 2009?**



If **Yes**, enter the adjusted profit or loss for income tax purposes for the 2009 tax year.

Candidate	Father or legal guardian	Mother or legal guardian	Spouse or partner (as applicable)
Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
€ <input type="text"/>	€ <input type="text"/>	€ <input type="text"/>	€ <input type="text"/>

- F6. Were you a proprietary director or shareholder of a limited company in 2009?**



Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
--	--	--	--

- F7. Did you receive a pension other than a Social Welfare State Pension in 2009?**



If **Yes**, enter the total gross amount.

Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
€ <input type="text"/>	€ <input type="text"/>	€ <input type="text"/>	€ <input type="text"/>

- F8. Did you have any income in 2009 from savings, deposit accounts or investments?**



If **Yes**, enter the total income earned.

Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
€ <input type="text"/>	€ <input type="text"/>	€ <input type="text"/>	€ <input type="text"/>

- F9. Did you have any income in 2009 from a maintenance arrangement?**



If **Yes**, enter the total gross amount.

Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
€ <input type="text"/>	€ <input type="text"/>	€ <input type="text"/>	€ <input type="text"/>

- F10. Did you receive a lump sum payment during 2009 from retirement or redundancy?**



If **Yes**, enter the total gross amount received **and** the number of relevant years worked.

Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
€ <input type="text"/>	€ <input type="text"/>	€ <input type="text"/>	€ <input type="text"/>
Years <input type="text"/>	Years <input type="text"/>	Years <input type="text"/>	Years <input type="text"/>

## Section F

## Continued...

**F11. Did you have any income in 2009 from disposals of assets or rights?**



If **Yes**, you will need to complete a Disposal of Assets and Rights Schedule and enter the gain or loss for grant purposes.

Candidate	Father or legal guardian	Mother or legal guardian	Spouse or partner (as applicable)
Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
€	€	€	€

**F12. Did you have any income in 2009 from gifts or inheritances?**



If **Yes**, you will need to complete a Gifts and Inheritances Schedule and enter the net value.

Candidate	Father or legal guardian	Mother or legal guardian	Spouse or partner (as applicable)
Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
€	€	€	€

**F13. Did you receive any other income in 2009 from any sources not mentioned above?**



If **Yes**, please provide a description of income

and

enter total gross amount received.

Candidate	Father or legal guardian	Mother or legal guardian	Spouse or partner (as applicable)
Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
€	€	€	€

**Note:** If you have more than one income from any other source please use the additional notes section on page 12 of this form to give us the details.

**F14. Did you make a legally enforceable maintenance payment in 2009 following separation or divorce?**



If **Yes**, enter the total gross amount paid.

Candidate	Father or legal guardian	Mother or legal guardian	Spouse or partner (as applicable)
Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
€	€	€	€

## Section F

## Continued...

F15. Did you make any pension contributions in 2009?



If **Yes**, enter the total gross amount paid.

Candidate	Father or legal guardian	Mother or legal guardian	Spouse or partner (as applicable)
Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
€ <input type="text"/>	€ <input type="text"/>	€ <input type="text"/>	€ <input type="text"/>

F16. Did you have a permanent change in circumstances in relation to reckonable income since 2009?



Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
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### Reminder:

- Read the Data Protection Statement on page 14
- Sign and date the Declaration on page 15
- Complete the Checklist on page 16

**Note:** If you, your parent(s), legal guardian, spouse or partner, as applicable, fail to complete the relevant sections or fail to provide the documents we need, we will return the application form to you.

This will delay the processing of your grant application and may delay payment if your application is successful.

## Additional Notes

If you are providing extra information below please clearly mark the section and question number to which it relates.

[illegible]

## Additional Notes

If you are providing extra information below please clearly mark the section and question number to which it relates.

[illegible]

## Data Protection Statement

The information you give on this form will be used to administer your application for a student grant.

The contact details you give will be used solely to make further contact with you about your application for a student grant, where necessary.

The local authority, VEC and the Department of Education and Skills will treat all information and personal data as confidential. These bodies may ask for other information or documents if needed to process your application.

The local authority, VEC or the Department of Education and Skills may also disclose information you supply to other government departments and public bodies including the Revenue Commissioners, the Department of Social Protection, the Department of Justice, Equality and Law Reform and further and higher education institutions so that it can:

- obtain information to decide whether you are eligible for a student grant;
- verify information that you have supplied including your Personal Public Service (PPS) number;
- assist in processing your student grant application and paying the student grant;
- verify that you are registered on and continuing to attend an approved course at an approved institution.

The local authority or VEC may also refer information that you have supplied to:

- the Department of Education and Skills for clarification on the interpretation of the relevant grants scheme;
- another local authority or VEC if appropriate or necessary.

Local authorities, VECs and the Department of Education and Skills have a duty to protect public funds and may use the information you give to prevent and detect fraud by giving information to the relevant authorities if appropriate or necessary.

The local authority and VEC may store the information you supply on a student grants database.

The local authority, VEC and the Department of Education and Skills will keep your information to carry out audits, reviews and inspections of student grants according to their data retention policies.

## Declaration

I/We declare that all the information that I/we have given on this form together with the supporting documentary evidence is complete and accurate.

I/We will tell my/our local authority or VEC immediately if my/our means or circumstances change.

I/We understand that the contact details I/we have given on this form will be used solely to make further contact with me/us about this application.

I/We have read and understood the data protection statement and I/we accept its content.

I/We consent to the disclosure of the information supplied to other government departments and public bodies including the Revenue Commissioners, the Department of Social Protection, the Department of Justice, Equality and Law Reform and further and higher education institutions, for the purposes outlined in the data protection statement.

### Candidate dependent on parent(s) or legal guardian:

Signature of candidate (*not block capitals*)

Date

Signature of candidate's father or legal guardian (*not block capitals*)

Date

Signature of candidate's mother or legal guardian (*not block capitals*)

Date

### Mature candidate dependent on parent(s) or legal guardian:

Signature of candidate (*not block capitals*)

Date

Signature of candidate's father or legal guardian (*not block capitals*)

Date

Signature of candidate's mother or legal guardian (*not block capitals*)

Date

### Independent mature candidate:

Signature of candidate (*not block capitals*)

Date


Signature of candidate's spouse or partner (*not block capitals*)

Date

**WARNING:** If you, your parent(s), legal guardian, spouse or partner, as applicable, knowingly make a false statement or knowingly withhold information, you will lose your grant and will have to repay any portion of a grant that you have already received. You or your parent(s), legal guardian, spouse or partner, as applicable, may also be prosecuted leading to a fine, a prison term or both.

## Checklist

Before you return this form to your local authority or VEC, please make sure that you have:

- fully answered all questions and that your parent(s), legal guardian, spouse or partner, as applicable, have done so as well; ☐
- enclosed all the documents which have been asked for as evidence. Look for this icon  next to a question and check the guidance notes to find out which documents are needed. You must submit original documents (not photocopies) unless otherwise indicated in the guidance notes; ☐
- signed and dated the relevant declaration(s). ☐
- if you have accepted your place on an approved course, you will need to fill in a **Course Acceptance Form** which is available to download from [www.studentfinance.ie](http://www.studentfinance.ie) or by contacting your local authority or VEC. ☐

**You must return your completed form and documentary evidence to your local authority or VEC**

## For Official Use ONLY

Candidate's full name:

Student reference number:

Date of receipt of original application:

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Returned to candidate on:

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Date completed application resubmitted:

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Decision:

Approved ☐  
Refused ☐

Decision date:

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Reason for refusal:

College being attended:

Course being attended:

### AWARD DETAILS:

Adjacent Rate

☐

Non Adjacent Rate

☐

Full Maintenance

☐

Part Maintenance - 75%

☐

Part Maintenance - 50%

☐

Part Maintenance - 25%

☐

Part Tuition Fees - 50%

☐

Special Rate

☐

Rate Approved

€

Fee Approved

€

Student Service Charge

☐