**1916 Bursary Application Form 2021-2022**

**PERSONAL INFORMATION**

|  |  |
| --- | --- |
| Name: |  |
| Home Address: |  |
| EIRCODE: **(compulsory)** | |  |  | | --- | --- | | Date of Birth: | \_\_\_\_/\_\_\_\_/\_\_\_\_ | |
| E-mail Address: |  |
| Phone Number: | |  |  | | --- | --- | | CAO Number: |  | |

**Name and Location of Primary and Secondary Schools attended. Tick box if DEIS school**

|  |  |  |
| --- | --- | --- |
| Primary School Name Location |  |  |
| Secondary School Name Location |  |  |

**GENERAL INFORMATION**

**Please tick boxes as appropriate (Applicants must belong to one of these categories to be eligible to apply for the 1916 Bursary).** *(Proof of income to be supplied)*

|  |  |
| --- | --- |
| Based on household income for 2020, I should qualify for the Special Rate SUSI grant | I am in receipt of a DSP means-tested Social Welfare payment |
|  |  |

**I have applied to third level as follows:** *(tick as appropriate)*

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Leaving Certificate Student | HEAR | DARE | Special Case Admission | Further Education & Training | Access/ Foundation Course | Mature Student | Part/Time Applicant |
|  |  |  |  |  |  |  |  |

**Please tick any of the following Bursary Target Groups which apply to you:**

|  |  |
| --- | --- |
| From a disadvantaged socio-economic group |  |
| Member of the Traveller Community |  |
| Lone Parent |  |
| In/was in care of the State/TUSLA |  |
| Member of an Ethnic Minority |  |
| Registered with a disability other than a specific learning difficulty |  |
| FET/QQI Applicant |  |
| First Time Mature Student |  |

**What is your highest level of formal education?** *(tick as appropriate)*

|  |  |  |  |
| --- | --- | --- | --- |
| Primary | Secondary | PLC/QQI-FET/Foundation | Third Level |
|  |  |  |  |

**Please state the occupation of your father and mother (or self and partner if you are over 23)**

|  |  |  |  |
| --- | --- | --- | --- |
| Father | Mother | Self | Partner |
|  |  |  |  |

|  |  |
| --- | --- |
| **How many dependents live in your home?** |  |
| **Do you and/or your parents/partner have a valid medical card (as of 31/12/2020)?** |  |

**PERSONAL STATEMENT** Use additional page if required

|  |
| --- |
|  |

**Declaration:** I declare that all the information provided is true, complete and accurate.

***Privacy Notice***

*IT Sligo values your privacy and recognises the need to process your personal data in a fair, transparent and lawful manner in accordance with the legal obligations as set out in the General Data Protection Regulation (GDPR) and the Irish Data Protection Act 2018.*

*The personal data disclosed to us as part of this application process will be processed for the purposes of the 1916 bursary only.  The personal data will be shared with:*

* *the other participating institutions in this Cluster (i.e. GMIT, LYIT and NUI Galway) in order to assess your application and process this bursary;*
* *the HEA and Department of Education & Skills (the funders of the bursary) so that anonymised data can be shared by them for the purpose of research, development and evaluation of this initiative.*

*Your data will be held for 10 years in line with statutory requirements.*

*IT Sligo’s detailed student privacy statement is available at* [*www.itsligo.ie/student-hub/*](http://www.itsligo.ie/student-hub/) *under Data Protection*

*Please tick the box to confirm that you have read and understood the information above and are agreeable to the terms of this privacy notice.*

**Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Application Form Instructions**

1. **Proof of Household Income:**

The following **Proof of Household Income** Documentation relating to 2020 **must be supplied** when applying.

***If you are under 23 years of age on application:*** Household income refers to both your parents and your own income.

***If you are a Mature Student (over 23):*** Household income refers to you and whoever is in your household (parents if living at home or partner if you are living with a partner).

**Only the following Proof of Income types can be accepted:**

|  |  |
| --- | --- |
| **Income Type** | **Supporting Document** |
| Department of Social Protection | DSP statement listing all payments and number of weeks received in 2020 |
| Self-Employment/Farming Income/Rental Income | Notice of assessment for 2020 |
| Employment | Copy of P21 for 2020 |
| Redundancy Payment | RP50 (all pages) |
| Retired with Private Pension | Private pension provider statement |

**PLUS**

|  |  |
| --- | --- |
| **SUSI** | **If applying for the Bursary as a SUSI applicant (rather than a social-welfare recipient) you must submit the full SUSI letter including reckonable income sheet, when your SUSI application has been approved for 21/22.**  **All of the six successful recipients must supply proof of qualifying for the Special Rate of SUSI by next September.**  Please note that SUSI opens for applications in early April and early Application is recommended if applying for the 1916 Bursary |

**Applications can only be provisionally assessed when supporting income documentation is received and this must be received by 5pm on 9th July 2021**

1. **Bursary Target Groups:**

Proof of belonging to target groups must be provided – i.e: letter from TUSLA, Travellers Group, DSP Lone Parent/Disability, legal status in country or letter from refugee support groups, results from FE/PLC programme etc.

1. **Medical Card:**

Include copy of medical cards of all persons ticked as having valid medical card

1. **Personal Statement:**

Provide any additional information that will assist in the assessment of your application

**Queries:**

E-mail [access@itsligio.ie](mailto:access@itsligio.ie) phone 071 99305417

**Closing Date:**

5pm on the 9th July 2021

**Applications to be sent to:**

Access Office, Institute of Technology Sligo, Ash Lane, Sligo, F91 YW50