|  |  |
| --- | --- |
| Institute of technology blanchardstown  Reach Access Programme - Application Form  For 1st Year Entry in September 2017 | ITB logo landscape B&W |

**Closing Date:**  Friday 7th April 2017 @ 5pm

**Return Forms to:** Adrienne Harding, Access Officer, ITB, Blanchardstown Road North, Blanchardstown, D15 YV78

|  |  |  |  |
| --- | --- | --- | --- |
| Applicant Information | | | |
| Surname: |  | First Name: |  |
| Address: |  | | |
| Date of Birth: |  | CAO No: |  |
| Phone Number: |  | Email Address: |  |
| Medical Card? | YES  NO | Medical Card No: |  |
| Have you applied to the HEAR Scheme, and submitted your supporting financial documentation?  Please tick: YES  NO | | ITB welcomes applications from members of the Traveller Community and are working to increase access rates at third level. If you are a member of the Traveller Community, please tick this box. | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Family To determine your income limits we need to know the number of dependents in your family.  (Include your parents and anyone under 16, or over 16 if still in fulltime education). Do not include yourself in this section. | | | | |
| Name of family member | DOB | Relationship to you | Highest level of education (i.e. junior cert, leaving cert, third level) | Currently Occupation or place of study |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Course Choices Please list the ITB courses for which you are applying for under the REACH programme in order of preference (e.g. BN001).  These courses must also be listed on your CAO application form. | | | | | | |
| **Level 6 / 7** | | | **Level 8** | | | |
| 1 |  | | 1 |  | | |
| 2 |  | | 2 |  | | |
| 3 |  | | 3 |  | | |
| 4 |  | | 4 |  | | |
| Second Level education This section is used to determine if you attended a DEIS School for 5 or more years at second level. | | | | | | | |
| Primary School: | |  | | | Years attended: |  |
| Secondary School: | |  | | | Years attended: |  |

|  |
| --- |
| pERSONAL STATEMENT Your statement should outline – Why you want to study at third level, why you chose ITB, any obstacles you have faced e.g. economic, social, family etc. and any other information you would like to share to support your application. An additional page may be attached. |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |

|  |  |  |  |
| --- | --- | --- | --- |
| Disclaimer and Signature | | | |
| I certify that my answers are true and complete to the best of my knowledge.  I consent that ITB may check my CAO application and access course choice information and any documentation submitted to support my application for the HEAR scheme.  I understand that my application (and supporting documentation) may be reviewed by an independent advisor.  I understand that some details on my application may be used for research purposes but that my name will never be used. | | | |
| Signature |  | Date |  |

|  |  |  |  |
| --- | --- | --- | --- |
| |  |  | | --- | --- | | ITB REACH Access Programme  Financial Information | ITB logo landscape B&W | | ITB logo landscape B&W |

|  |
| --- |
| **Have you have applied to the HEAR scheme and submitted your supporting financial  documentation to the CAO?** YES  NO  **If YES, you do not need to complete this section**.  **If NO, continue to Part 1.** |

|  |  |  |  |
| --- | --- | --- | --- |
| Part 1 – family Financial circumstances | | | |
| Student Name: |  | PPS No: |  |
| Parent/Guardian 1:  In Employment and will Submit P21 for 2015: YES  NO | | Parent/Guardian 2:  In Employment and will Submit P21 for 2015: YES  NO | |
| If YES, attach the relevant P21s to this form.  If NO, sign Part 2 & have Part 3 completed at your local Social Welfare Office. | | | |

|  |  |  |  |
| --- | --- | --- | --- |
| Part 2 – to be signed by the applicant’s parents I authorize the release of the information outlined below for the purpose of assessing a REACH applicant | | | |
| Parent/Guardian 1: |  | Parent/Guardian 2: |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Part 3 – to be compelted by a DSP Official in your local social welfare office | | | |
| Parent/Guardian 1 Name: |  | Parent/Guardian 1  PPS No: |  |
| Type of Payments |  | Amount of Payment: |  |
| Type of Payments |  | Amount of Payment: |  |
| Type of Payments |  | Amount of Payment: |  |
| **Total amount of Social Welfare Income from all social welfare schemes made to the PPS number in 2015** | | | **€** |
| Parent/Guardian 2 Name: |  | Parent/Guardian 2  PPS No: |  |
| Type of Payments |  | Amount of Payment: |  |
| Type of Payments |  | Amount of Payment: |  |
| Type of Payments |  | Amount of Payment: |  |
| **Total amount of Social Welfare Income from all social welfare schemes made to the PPS number in 2015** | | | **€** |

|  |  |  |  |
| --- | --- | --- | --- |
| Signature of DSP Official: |  | Official Stamp: |  |
| Date: |  |

To be valid forms must be completed, signed and stamped by a DSP Official. REACH is an admissions scheme which offers reduced points places on ITB courses to school leavers from socio-economically disadvantaged applicants.

|  |  |
| --- | --- |
| ITB REACH Access Programme  School Reference | ITB logo landscape B&W |

|  |
| --- |
| School reference is to be completed by School Principal, Guidance Counsellor or Year Head. |

|  |  |  |  |
| --- | --- | --- | --- |
| Student Name: |  | Relationship to student: |  |
| How long have you know the applicant? |  | How would you describe their attendance? | Excellent  Good  Fair  Poor |
| If attendance is less than excellent please outline if there are reasons outside of their control that impacted on their attendance. | | | |
| What is your assessment of the applicant’s academic ability? What is their potential to obtain a place at third level? | | | |
| Is the applicant motivated to succeed at third level, how have they prepared for third level? | | | |
| Please outline any non-academic considerations which you believe should be taken into account when assessing this application. This may include family background, challenges, achievements, etc. | | | |
| Signature: |  | Date: |  |