

**MILLENNIUM PARTNERSHIP FUND FOR
DISADVANTAGE:
ACCESS TO THIRD LEVEL EDUCATION 2009-2010
APPLICATION FORM**

Applicant No: 09/

PERSONAL DETAILS

PPS No:	NAME:
Home Address (compulsory)	_____
College Address (If preferred contact address)	_____
Contact Telephone Number	_____
Mobile Number (if any)	_____
E-mail Address	_____
Gender	Male <input type="checkbox"/> Female <input type="checkbox"/>
Age Range: (Please state DOB or age range)	17-20 <input type="checkbox"/> 21-24 <input type="checkbox"/> 25-34 <input type="checkbox"/> 65+ <input type="checkbox"/>
DOB:	35-44 <input type="checkbox"/> 45-54 <input type="checkbox"/> 55-65 <input type="checkbox"/>
Education History <i>Please give details of your educational history to date and indicate the highest qualification you have achieved</i>	No qualification <input type="checkbox"/> Primary Certificate <input type="checkbox"/> Group Certificate <input type="checkbox"/> Intermediate/Junior Certificate <input type="checkbox"/> Leaving Certificate <input type="checkbox"/> Leaving Cert Applied <input type="checkbox"/> Further Education Qualification (e.g. FETAC/HETAC/NCEA etc.) <input type="checkbox"/> Third Level Qualification <input type="checkbox"/> Other <input type="checkbox"/>
Employment Status <i>Tick the category(ies) most relevant to your current situation and/or prior to commencing further/higher education</i> <i>If ticking the VTOS direct progression category please also indicate employment status prior to VTOS</i>	Long term unemployed >(longer than) 12 mths <input type="checkbox"/> Unemployed < (less than) 12 mths <input type="checkbox"/> Unemployed but not on live register <input type="checkbox"/> Employed full time <input type="checkbox"/> Employed part time e.g. C.E./J.I. etc. <input type="checkbox"/> Seasonally employed <input type="checkbox"/> Under employed <input type="checkbox"/> Self employed <input type="checkbox"/> Full time education (direct progression) <input type="checkbox"/> VTOS (direct progression) <input type="checkbox"/> In receipt of Family Income Supplement (FIS) <input type="checkbox"/>

Personal Details cont.

<p>TARGET GROUP</p> <p><i>Please specify who you are referring to in this section:</i></p> <p>Self: <input type="checkbox"/></p> <p>Family: <input type="checkbox"/></p> <p><i>Tick as many as you feel are appropriate to you, or your family's situation – please refer to Target Group Categories table for further information</i></p>	<p>Code #</p> <p>1. Early School Leaver <input type="checkbox"/></p> <p>2. Long Term Unemployed >12 mths <input type="checkbox"/></p> <p>3. Underemployed/Part-Time/Seasonal <input type="checkbox"/></p> <p>4. Low Income Family/Small holder <input type="checkbox"/></p> <p>5. Unemployed but not on Live register <input type="checkbox"/></p> <p>6. Disadvantaged woman <input type="checkbox"/></p> <p>7. Disadvantaged man <input type="checkbox"/></p> <p>8. Lone parent/From lone parent family <input type="checkbox"/></p> <p>9. Traveller <input type="checkbox"/></p> <p>10. Minority group <input type="checkbox"/></p> <p>13. Ex-offender <input type="checkbox"/></p> <p>14. Person with Disability <input type="checkbox"/></p> <p>15. English not mother tongue <input type="checkbox"/></p> <p>Other <input type="checkbox"/></p>
<p>Dependents in family (i.e. Individuals reliant on parental/main income earner support) <i>Include caring responsibilities</i></p>	<p>Number of Children _____</p> <p>Family Members _____</p>
<p>ACCOMMODATION</p>	<p>Local Authority <input type="checkbox"/> Private rented <input type="checkbox"/> Ownership <input type="checkbox"/></p> <p>Other <input type="checkbox"/></p>
<p>Number of siblings attending Further Or Higher Education</p>	<p>Further Education _____ Higher Education _____</p>

COURSE DETAILS

<p>What is your course of study (e.g. FETAC Level II Graphic Design, B.A. English and History)</p>	
<p>Student Identification Number Course Code (if applicable)</p>	
<p>Further Education/Third Level Details <i>i.e. Name of Institution (1), Address (2), Contact Name (3) and Telephone Number (4)</i></p>	<p>1. _____</p> <p>2. _____</p> <p>3. _____</p> <p>4. _____</p>
<p>Certification to be Awarded upon completion of Course (Certificate/Diploma/Degree/M.A. etc.)</p>	
<p>Duration of Course <i>Please tick the relevant boxes</i></p>	<p>Is this course full time/part time/modular? Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Modular <input type="checkbox"/></p> <p>How long is this course of study? 1 year <input type="checkbox"/> 2 years <input type="checkbox"/> 3 years <input type="checkbox"/> 4 years <input type="checkbox"/></p>
<p>Current Year in Course <i>Please indicate if you are repeating</i></p>	<p>1st year <input type="checkbox"/> 2nd year <input type="checkbox"/> 3rd year <input type="checkbox"/> 4th year <input type="checkbox"/></p> <p>Repeat <input type="checkbox"/></p>

FINANCIAL DETAILS

<p>Please detail what financial support is/will be available to you on an ongoing basis*.</p> <p><i>For example DCC or VEC Maintenance Grant, Part Time Work, Family Contribution, College Access Funds, Back To Education Allowance, Loans, Scholarship/Bursary, Other Benefits i.e. Rent Allowance etc.</i></p> <ul style="list-style-type: none"> • * <i>Yearly (Y)</i> • * <i>Monthly (M)</i> • * <i>Weekly (W)</i> <p><i>(Evidence of the above will be required if your application is successful)</i></p>	<table border="1"> <thead> <tr> <th>Type</th> <th>Amount</th> <th>*Y</th> <th>*M</th> <th>*W</th> </tr> </thead> <tbody> <tr><td>_____</td><td>_____</td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td>_____</td><td>_____</td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td>_____</td><td>_____</td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td>_____</td><td>_____</td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td>_____</td><td>_____</td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td>_____</td><td>_____</td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td>_____</td><td>_____</td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr> <td colspan="2" style="text-align: right;">Total</td> <td colspan="3">€ _____</td> </tr> </tbody> </table>	Type	Amount	*Y	*M	*W	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Total		€ _____		
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<p>Are you working during term time? If yes, how many hours per week do you work?</p>	<p style="text-align: center;">Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>< 8 hrs <input type="checkbox"/> 9-12 hrs <input type="checkbox"/> 13-16 hrs <input type="checkbox"/> 17-20 hrs <input type="checkbox"/> >20 hrs <input type="checkbox"/></p>																																													
<p>Expenditure on a weekly basis</p> <p><i>(Please list your main expenditure incurred on a weekly or regular basis)</i></p>	<table border="1"> <thead> <tr> <th>Type</th> <th>Amount</th> </tr> </thead> <tbody> <tr><td>_____</td><td>_____</td></tr> <tr><td>_____</td><td>_____</td></tr> <tr><td>_____</td><td>_____</td></tr> <tr><td>_____</td><td>_____</td></tr> <tr><td>_____</td><td>_____</td></tr> <tr> <td colspan="2" style="text-align: right;">Total</td> <td>€ _____</td> </tr> </tbody> </table>	Type	Amount	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	Total		€ _____																														
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<p>All requests for funding cannot be met due to demand for the Fund. Please prioritise the purpose(s) for which funding is requested in highest order of need, giving approximate costs for each element e.g. books, childcare, accommodation, travel, tuition, study supports, computer facilities, guidance, mentoring etc., as appropriate.</p> <p><u>N.B. Please keep all receipts relating to the above as in the event of your application being successful they will be requested as proof of expenditure.</u></p>	<table border="1"> <thead> <tr> <th>Purpose</th> <th>Amount</th> </tr> </thead> <tbody> <tr><td>1. _____</td><td>_____</td></tr> <tr><td>2. _____</td><td>_____</td></tr> <tr><td>3. _____</td><td>_____</td></tr> <tr><td>4. _____</td><td>_____</td></tr> <tr><td>5. _____</td><td>_____</td></tr> <tr><td>6. _____</td><td>_____</td></tr> <tr> <td colspan="2" style="text-align: right;">TOTAL</td> <td>€ _____</td> </tr> </tbody> </table>	Purpose	Amount	1. _____	_____	2. _____	_____	3. _____	_____	4. _____	_____	5. _____	_____	6. _____	_____	TOTAL		€ _____																												
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ADDITIONAL INFORMATION

<p>Please state why support for your course is required, giving an account of the blockages, if any, that you are experiencing (For example: financial stress in household, number of dependant siblings in household etc.)</p> <hr/> <hr/> <hr/> <hr/>
<p>Please detail any additional relevant information you wish to include in your application? (For example: why you are not in receipt of a Higher Education Grant if this is the case)</p> <hr/> <hr/> <hr/> <hr/>
<p>How did you find out about the Millennium Partnership Fund?</p> <hr/>
<p>Have you previously received support through the Millennium Partnership Fund or IPC Return to Education Funds? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please tick the relevant box: Prior to 06 <input type="checkbox"/> 2006-07 <input type="checkbox"/> 2007-08 <input type="checkbox"/> 2008-09 <input type="checkbox"/></p>

Statement

I hereby declare that the above information, in applying to the Millennium Partnership Fund for Disadvantage: Access to Third Level Education 2008-2009, is true and correct to the best of my knowledge. Furthermore, I give permission to allow additional information of relevance to this application to be sought from, or shared with, others as appropriate.

Signed: _____ **Date:** _____

Please return to: Denise McCool, Community Development/Education Officer
 Inishowen Development Partnership, St. Mary's Rd., Buncrana, Co. Donegal

Closing Deadline: MONDAY, OCTOBER 5th 2009 5.00pm

If your application is successful you will be sent a letter of offer and a set of contractual Terms & Conditions to sign and return. You will also be required to submit evidence of enrolment and proof of financial supports and expenditure.

For Office Use Only		
Applicant No:	MF ↑	RtoE ↑
Assessor:		
Amount Approved:		
Payment Details: (e.g. direct transfer/cheque/payment by voucher)		



Transforming Ireland

MILLENNIUM PARTNERSHIP FUND FOR DISADVANTAGE: ACCESS TO THIRD LEVEL EDUCATION 2009-2010



ASSESSMENT CRITERIA AND GUIDELINES

The following core criteria will be used by the Inishowen Development Partnership in assessing applicants under the Fund.

- The applicant must currently be in further/higher education or have secured a place within the current academic year 2009-2010.
- The applicant must be able to provide proof of college registration or a student identification number.
- The applicant must be a resident, or their family home must be located, within the Inishowen Partnership area. Applications from RAPID/CLAR areas will be prioritised within the application process.
- The applicant must be an E.U. citizen, have official refugee status or have been granted humanitarian leave to remain in the state.
- The applicant must be in receipt of a Local Authority, County Council or V.E.C. maintenance grant (thus establishing level of income and residence). Students not in receipt of a maintenance grant may be eligible in exceptional circumstances, which should be justified at a local level on a case- by-case basis.
- The course of study must be at a recognised level with an emphasis on retention at third level however courses with designated higher education links are also eligible, e.g. FETAC, Level II higher links courses of study.
- Courses undertaken with PLC status must have higher education links to third level through HETAC/FETAC in order to be eligible.
- While the Fund is primarily aimed at supporting students on full time courses, applications for support for undertaking part time courses will also be considered.
- Those who are holders of, or dependents of persons, with the following Social Welfare Payments, are eligible under this Fund:
 - **Unemployment payment** e.g. Unemployment Assistance, Unemployment Benefit
 - **Means-tested welfare payment** e.g. Farm Assist, One Parent Family Payment, Carer's Allowance, Disability Allowance, Blind Person's Pension, Invalidity Pension
 - **Family Income Support**
 - **Medical Card Holder**
 - Applicants in receipt of the Back to Education Allowance for unemployed people, lone parents and people with disabilities will also be considered.



National Development Plan 2007 - 2013
Transforming Ireland

Target Group Categories

Applicants for the fund will be from the following categories or may be dependents of persons, in the categories outlined below:



<ul style="list-style-type: none"> Adults and early school leavers who left school with low or no formal qualifications
<ul style="list-style-type: none"> People who are long-term unemployed, those at risk of becoming long-term unemployed and those at risk of reverting to long-term unemployment especially those in the older age groups
<ul style="list-style-type: none"> Those people who cannot derive an adequate income from their main occupation e.g. seasonal workers, persons involved in small scale or seasonal fishing, low-income farm families
<ul style="list-style-type: none"> Low-income family units
<ul style="list-style-type: none"> Those not in paid work but not eligible to be on the Live Register
<ul style="list-style-type: none"> Disadvantaged women who have particular experience of barriers to participation in education
<ul style="list-style-type: none"> Disadvantaged men, including those experiencing rural isolation
<ul style="list-style-type: none"> Socially and economically disadvantaged lone parents and others with caring responsibilities that may prohibit their participation in education
<ul style="list-style-type: none"> Travellers
<ul style="list-style-type: none"> Minority Groups
<ul style="list-style-type: none"> Homeless People
<ul style="list-style-type: none"> Drug Users
<ul style="list-style-type: none"> Ex-offenders
<ul style="list-style-type: none"> People with Disabilities
<ul style="list-style-type: none"> People for whom English is not the mother tongue

**MILLENNIUM PARTNERSHIP FUND FOR DISADVANTAGE:
ACCESS TO THIRD LEVEL EDUCATION 2009-2010**

GENERAL INFORMATION FOR APPLICANTS

- The **closing date** for applications is **Monday, 5th OCTOBER 2009** and the **timeframe** for which funding is available is for the current academic year 2009-2010.
- **Failure to fill out the application form in full and submit the required information/documents etc.** will result in delays in processing the application. **Support will be provided in completing the application form, if required.**
- **Proof** of a social welfare payment (Family or Own, as applicable) or a grant payment (Own) must be given prior to approval for funding i.e.
 - Adults (over 23 yrs.) living independently of your family outside the family home – please submit your own copies of the relevant financial documents.
 - Dependent adults/students residing in the family home – please attach household/parental copies of the relevant financial documents.
- **Proof** of college registration and/or college identification and/or grant eligibility and/or income and/or E.U./Official Refugee Status/Humanitarian Leave to Remain in the State will be required.
- **Receipts are required** and will be requested for funding approved and paid out except where a non- receipted subsistence rate has been applied for, agreed and approved.
- **Conditions** as set out in the **letter of offer** to successful applicants must be adhered to i.e. signed contract/receipts as appropriate/signed non-receipted subsistence claim forms etc.
- Successful applicants will be expected to provide the Inishowen Development Partnership with **information and feedback**, as requested.