

Final Course Acceptance Form - FA1/FA2

PLC, Undergraduate or Postgraduate Course in Ireland

This form should be completed after you have made your final acceptance of a place on an approved full-time plc, undergraduate or postgraduate course in Ireland and have applied for a student grant for 2010/11.

Part 1 – Candidate’s personal details

Your Name: _____

Your Home Address: _____

Your PPS No:

Your Date of Birth:

Your Telephone No: Mobile: _____ Home: _____

Part 2 – Course details and sources of student financial assistance

The approved full-time course which I have accepted and will pursue in 2010/11 is as follows:

Title of Approved Course: _____ Name of College: _____

Address of College: _____ Distance to College (kms): _____

Level of Course:
 (please tick ✓)
 PLC: Level 5 Level 6
 Undergraduate: Level 6 Level 7 Level 8
 Postgraduate: H Dip. PG Diploma Master PhD

Is this course an “add on” course?
 Yes No

Course Duration:
 (please tick ✓)
 1 year 2 years 3 years 4 years more than 4 years

Course Year in 2010/11:
 (please tick ✓ i.e. what year are you entering this academic year?)
 Year 1 Year 2 Year 3 Year 4 Year 5

CAO Course Code (where applicable): (e.g. AL001) _____
 (please attach a copy of CAO/College offer)

Please confirm if this course is full-time:
 (please tick ✓)
 Yes No

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

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: _____

Part 3 – Declaration and Signature

Declaration:

I certify that the above information is correct and that the course I am attending is a full-time course.

I undertake to notify the local authority/VEC in my home area immediately of any change in my course, college or institution, duration, attendance pattern, social welfare entitlement or other student financial assistance.

I will also notify the local authority/VEC if I defer attendance on this course or if, having commenced the course, I cease to continue to attend.

Signature of Candidate: _____ Date: _____

Please note this form must be completed in full and returned to your local authority/VEC.