

# Scholarship Scheme Application Form

Please complete all relevant sections where applicable using block capitals and complete form in blue/black ink pen. Please tick the relevant boxes. If you or your parents/guardians are in receipt of any benefit, assistance or allowance please fill out section 1.8-1.9 or 1.10-1.11, if not, proceed to section 1.12

## 1. PERSONAL DETAILS

1.1 **Firstname:** \_\_\_\_\_ **Surname:** \_\_\_\_\_

1.2 **Sex:**  Male  Female

1.3 **Date of Birth:**

1.4 **Place of Birth:**  Irish  EU National  Other

If other please specify: \_\_\_\_\_

1.5 **Home Address:** \_\_\_\_\_ **College Address (if different):** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Mobile:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Please  
Afix  
Photo  
Here**

1.6 **Are you a member of Member First Credit Union ?**

Yes  No

If yes, how long are you a member? \_\_\_\_\_ **CU Account No:** \_\_\_\_\_

1.7 **Employment /Educational Status:**

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Leaving Cert Student | <input type="checkbox"/> Employed Full Time | <input type="checkbox"/> Trainee Apprentice |
| <input type="checkbox"/> College Student      | <input type="checkbox"/> Employed Part Time | <input type="checkbox"/> Self Employed      |
| <input type="checkbox"/> Unemployed           |   |   |

1.8 **Benefits & Payments - Please tick any payments YOU are in receipt of:**

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Not Applicable               | <input type="checkbox"/> Job Seekers Allowance          | <input type="checkbox"/> Family Income Support    |
| <input type="checkbox"/> One Parent Family Payment    | <input type="checkbox"/> SOLUS (FÁS) Training Allowance | <input type="checkbox"/> Carers Allowance         |
| <input type="checkbox"/> Disability Benefit/Allowance | <input type="checkbox"/> Back to Work Allowance         | <input type="checkbox"/> Family Income Supplement |
| <input type="checkbox"/> SOLUS (FÁS) Wage Payment     | <input type="checkbox"/> Back to Education Allowance    | <input type="checkbox"/> Job Seekers Benefit      |

1.9 **Number of dependants: Insert the number of non-working people residing with you who are - Financially dependant on YOU:**

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Not Applicable      |   |   |
| <input type="checkbox"/> Children Aged 0 - 5 | <input type="checkbox"/> Children Aged 6 - 15               | <input type="checkbox"/> Children Aged 16+          |
| <input type="checkbox"/> Spouse/Partner      | <input type="checkbox"/> Disabled Adult/Child/Sibling/Other | <input type="checkbox"/> Elderly Parent/Older Elder |

1.10 **Please tick any payments that your PARENTS or GUARDIANS are in receipt of:**

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Not Applicable               | <input type="checkbox"/> Job Seekers Benefit            | <input type="checkbox"/> Job Seekers Allowance    |
| <input type="checkbox"/> One Parent Family Payment    | <input type="checkbox"/> SOLUS (FÁS) Training Allowance | <input type="checkbox"/> Family Income Support    |
| <input type="checkbox"/> Disability Benefit/Allowance | <input type="checkbox"/> Back to Work Allowance         | <input type="checkbox"/> Carers Allowance         |
| <input type="checkbox"/> SOLUS(FÁS) Wage Payment      | <input type="checkbox"/> Back to Education Allowance    | <input type="checkbox"/> Family Income Supplement |

**1.11 Number of dependants: Insert the number of non-working people residing in the household**

**who are financially dependant on your PARENTS / GUARDIANS:**

Not Applicable

Children Aged 0 - 5

Children Aged 6 - 15

Children Aged 16+

Spouse/ Partner

Disabled Adult/Child/Sibling/Other

Elderly Parent/Older Elder

**1.12 Education - Schools Attended:**

Primary School Name & Address: \_\_\_\_\_

Secondary School Name & Address: \_\_\_\_\_

**1.13 Level of Education**

Intermediate/Junior Certificate

Leaving Certificate

Third Level Qualification

**2. COURSE DETAILS**

**2.1 Name of Course:** \_\_\_\_\_

Course Code (if applicable): \_\_\_\_\_ Student Number: \_\_\_\_\_

Name & Address of College: \_\_\_\_\_

**Duration of Course:**

**Is it full-time/part-time/modular?**  Full-time  Part-time  Modular

**How long is the course?**  1 year  2 year  3 year  4 year  Other \_\_\_\_\_

**Current year in course** (Please indicate if you are repeating)

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

**2.2 Level of Accreditation/Award upon completion of course:**

HETAC  FETAC  VTOS  SOLUS (FÁS) Apprenticeship  Cert

Adv. /Higher Cert  Diploma  Degree  Higher Diploma  Hons Degree

Masters Degree  Post Graduate Diploma  PHD/Higher Doctorate

**2.3 Yearly Course Fees:** \_\_\_\_\_

**3. FINANCIAL DETAILS**

**3.1 Please detail what financial support is currently available to you on an ongoing basis:**

Maintenance Grant  Part Time work  Family contribution

College Access Funds  Back to Education Allowance  Loans

Scholarship/Bursary  Other Benefits - please specify \_\_\_\_\_

#### 4. EMPLOYMENT DETAILS

##### 4.1 Please give details of your current or most recent employment (if any).

Company Name/Employer Name: \_\_\_\_\_

Company Address: \_\_\_\_\_

\_\_\_\_\_

##### 4.2 Are you working during course term time? Yes No

If yes, how many hours per week do you work?  <8hrs  9-12hrs  13-16hrs  17-20hrs  >20hrs

#### 5. ADDITIONAL INFORMATION

##### 5.1 Personal Statement

**As part of the scholarship scheme application, please attach a typed personal statement of approx. 200 words**

**Useful guidelines to follow for the personal statement are;**

- Explain why you should receive the scholarship scheme from Member First Credit Union.
- Explain why you want to do this course and what you want to achieve from the course.
- What do you intend to do after the course is complete?
- What are your long term plans/goals?

#### 6. CHECKLIST

##### 6.1 Please check that you have completed all relevant sections from 1 to 4 and included the following items as part of your application;

- Fully completed Application Form
- Passport size photo \*1
- Personal Statement (see section 5.1 for more details)
- A written reference from a principal/teacher or employer from your most recent school, college or work place, please include referee contact details.

##### 6.2 Where did you hear about the Member First Credit Union Scholarship Scheme?

- Notice in office  Advert in newspaper  Mailing  Family member/friend
- Website  Other (please specify) \_\_\_\_\_

I hereby declare that the above information, in applying for the Member First Credit Union Scholarship is true and correct to the best of my knowledge. I give permission to allow additional information of relevance to this application to be sought from, or shared with, others as appropriate.

On receipt of the Member First Credit Union Scholarship, I agree to take part in any promotional activities with Member First Credit Union.

**Signed:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Please return to:**

Marketing Department, Member First Credit Union, Artane Roundabout, Artane, Dublin 5

**Closing Date for receipt of all applications is 2pm - 28<sup>th</sup> August 2018**

## Scholarship Scheme Terms and Conditions

### Access to further education & training

Member First Credit Union is awarding €15,000 worth of scholarships for 2018 based on certain criteria. The scholarships are exclusive to Member First Credit Union members to assist them with their chosen education path. Applications are invited from existing members who are currently attending or commencing training or education courses.

#### **1.0 Definitions**

1.1 "Scholarship Scheme" means that Member First Credit Union will award a total of €15,000 in scholarships based on certain criteria from Member First Credit Union. The scholarships are exclusive to Member First Credit members to assist them on their chosen education path. Applications are invited from anyone who is currently attending or commencing training or educational courses.

#### **2.0 Eligibility**

2.1 All eligible members who are over 16 years of age can apply to participate in the credit union Scholarship Scheme by completing the Scholarship Application Form.

#### **3.0 Scholarship Scheme Rules**

- 3.1 All applicants must be a member of Member First Credit Union for at least 3 months.
- 3.2 The applicant's account must be in good order and the account must not be in arrears.
- 3.3 Applicants must be residing in the Republic of Ireland.
- 3.4 An applicant commencing or participating on a course must be undertaken with an education body that is recognised by the Department of Education.
- 3.5 An applicant commencing or participating in an apprenticeship/training must be undertaken with a recognised body such as SOLUS(FÁS) or similar.
- 3.6 Applications will be accepted from students who have already commenced their course.
- 3.7 The credit union will accept applications for full and part-time courses.
- 3.8 The course duration must be at least one year.
- 3.9 The Scholarship Scheme is **not** open to applications for courses in private colleges.
- 3.10 Any course/apprenticeship or training that does not meet these requirements will not be eligible for application.
- 3.11 The successful applicant/s will receive the scholarship on the condition that they have been accepted on a training/third level course/s and proof of acceptance will be required.
- 3.12 An apprentice must obtain a job as an apprentice with a suitable employer, who can offer an apprenticeship in a certain chosen occupation - relevant employer contact details and proof of apprenticeship will be required
- 3.13 All applicants are required to complete the scholarship application form, provide a personal statement of approx. 200 words in support of their application as well as a reference letter.
- 3.14 No cash payments will be made. The scholarships will be in the form of payment for services e.g. fees, accommodation, books etc. Alternatively, receipts will be required for proof of purchase and payments will be issued.
- 3.15 Those awarded a scholarship may NOT apply in subsequent years. The scholarship is a once off payment.
- 3.16 The decision of Member First Credit Union Board of Directors is final.
- 3.17 Closing Date for receipt of all applications is as determined by the credit union.
- 3.18 Based on the volume and quantity of applications received you may be called for an interview as part of the selection process.

#### **4.0 Undertaking**

4.1 In participating in the credit union Scholarship Scheme, the member agrees to make themselves aware of and abide by the Scholarship Terms & Conditions.

#### **5.0 Interpretation**

5.1 These Terms & Conditions constitute the salient terms applicable to the provision of the Scholarship Scheme by the credit union.

#### **6.0 Identification**

6.1 To ensure compliance with the Criminal Justice Act, 2010 (as amended from time to time) the member will be required to produce to the credit union satisfactory evidence of identity, current permanent address and possibly source of funds by means of supporting documentation.

#### **7.0 Amendment of Terms & Conditions**

- 7.1 The credit union reserves the right to vary these terms and conditions if there is any relevant material change in the prevailing legal, tax or regulatory conditions or to enhance the security of the services provided by the credit union.
- 7.2 The credit union reserves the right at all times to introduce new conditions or to vary or amend existing conditions by giving at least fourteen days' notice thereof to the member, by whatever means deemed appropriate by the credit union which could include a notice display in the Credit Union Offices.