

INSTITUTE OF TECHNOLOGY BLANCHARDSTOWN

REACH Access Programme - Application Form

For 1st Year Entry in September 2019



Closing Date: Wednesday 1st May 2019 @ 12pm

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 <input type="checkbox"/>	NO <input type="checkbox"/>	Medical Card No:
Have you applied to the HEAR Scheme, and submitted your supporting financial documentation?		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. <input type="checkbox"/>	
Please tick: YES <input type="checkbox"/>		NO <input type="checkbox"/>	

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	

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Financial Information



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 2017: YES <input type="checkbox"/> NO <input type="checkbox"/>		Parent/Guardian 2: In Employment and will Submit P21 for 2017: YES <input type="checkbox"/> NO <input type="checkbox"/>	

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:
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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 2017			€
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 2017			€

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.

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School Reference



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

Student Name:		Relationship to student:	
Name of School:		DEIS School:	Yes <input type="checkbox"/> No <input type="checkbox"/>
How long have you known the applicant?		How would you describe their attendance?	Excellent <input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/>
<p>If attendance is less than excellent please outline if there are reasons outside of their control that impacted on their attendance.</p>			
<p>What is your assessment of the applicant's academic ability? What is their potential to obtain a place at third level?</p>			
<p>Is the applicant motivated to succeed at third level, how have they prepared for third level?</p>			
<p>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.</p>			
Signature:		Date:	