

Tullow
Community
School

The Mullawn
Tullow
Co. Carlow
T: 059-9151473
E:info@tullowcs.ie

May 2019

Re: Department of Education Book Grant Criteria

Der Parent/Guardian,

The Department of Education and Skills offers a book grant scheme to all secondary schools, to defray the cost of school books, in accordance with strict criteria. The following criteria must be satisfied to be considered eligible for the grant:-

- (i) Each parent/guardian must be in receipt of a current social welfare allowance;
- (ii) A valid current medical card must be produced in the main school office;
- (iii) Details of both parents must be completed on the form.

We are forwarding you a book grant application form, which you may complete and return to Tullow Community School main office by Friday 28th June, 2019, if you wish to be considered eligible for the book grant for the fourthcoming academic year.

Forms that do not satisfy the above criteria will not be considered.

Yours faithfully,

Paul Thornton
Principal

TULLOW COMMUNITY SCHOOL

BOOK GRANT APPLICATION FORM – Year 2019/2020

Name of Student: _____ Year Group Sept. 2019/20 _____
(1st year, 2nd year, etc)

Home Address: _____

Name of Parent/Guardian: _____

Address: _____

No of children: Pre-school []: Schoolgoing [];

If you are supporting anyone other than above, give details:

ALL SECTIONS MUST BE FULLY COMPLETED

Mother: Name: _____

Social Welfare: Are you in receipt of the following?

Unemployment Assistance []; Lone Parent Allowance []; Fás Scheme/SES [];

Invalidity Pension/Allowance []; Old Age Pension []; Widow(er)s Pension [];

Other: Please explain _____

Employment details: *(only complete if you are employed in any capacity)*

Name of employer: _____ Employment: _____

Full-time []; Part-time []; Other [] please explain _____

Spouse/Partner: Name: _____

Social Welfare: Are you in receipt of the following?

Unemployment Assistance []; Lone Parent Allowance []; Fás Scheme/SES [];

Invalidity Pension/Allowance []; Old Age Pension []; Widow(er)s Pension [];

Other [] Please explain _____

Employment details: *(only complete if you are employed in any capacity)*

Name of employer: _____ Employment: _____

Full-time []; Part-time []; Other [] please explain _____

If there are other circumstances, which may have a bearing on your application, please give details:

Do you hold a Medical Card? _____ Medical Card No. _____

(Parents current medical card must be produced at the school office).

If you or your dependants receive medical treatment for which you had to pay in the past year, please give details:

Amount of grant received last year, if any: _____

Signature: _____

Date: _____

Parent/Guardian

Form must be returned to the Main Office by Friday, 28th June, 2019.

FORMS WILL NOT BE ACCEPTED AFTER THAT DATE

October 2017

Dear Parent/Guardian,

Please find enclosed, cheque in the amount of €_____ .

This represents a grant from the Department of Education & Science to defray cost of school books.

Yours sincerely,

Paul Thornton,
Principal.

