

***Application for Learner Assistance I.T. Fund 2022***

Please complete below application form fully if you wish to apply for the LOETB Learner Assistance I.T. Fund. This fund can support the purchase of I.T. equipment/software up to a maximum of €300.00. Incomplete forms cannot be processed or approved. Please note, if your application is successful, payment will be made directly to your bank account. Please complete the Bank Mandate form and attach to this application along with any other relevant documentation.

Please return form to your Centre/Service Manager on or before Friday,

14th October 2022. Late applications cannot be considered for funding.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | | **Personal Details** | | | | | |
| 1.1 | | Full name | |  | | | |
| 1.2 | | Home address – Address Line 1 | |  | | | |
| Address Line 2 | |  | | | |
| Town/City | |  | | | |
| County | |  | | | |
| Eircode | |  | | | |
| 1.3 | | Contact email | |  | | | |
| 1.4 | | Contact phone number | |  | | | |
|  | | **LOETB Course Information** | | | | | |
| 2.1 | | Further Education and Training Centre/Service you are currently attending | |  | | | |
| 2.2 | | Course name and level | |  | | | |
| **3.** | | **Qualifying Criteria** – *tick yes/no and answer as appropriate* | | | **Yes** | **No** | |
| 3.1 | | Are you in receipt of a DEASP payment or dependent upon an individual in receipt of a DEASP payment? | | |  |  | |
| If you answered Yes to the above, what is the name of the payment and please provide of evidence of same. | | | | | |
| 3.2 | | Are you in receipt of an LOETB payment (for example Training Allowance, VTOS, Youthreach.) | | |  |  | |
| 3.3 | | Do you hold a full medical card?  (not a GP only card). Please provide a copy. | | |  |  | |
| 3.5 | | Are you in receipt of a SUSI grant or any other educational grant?  If yes, please provide evidence of same. | | |  |  | |
| **4.** | | **Other mitigating circumstances to support your application if you are not included in any of the categories covered in section 3.** *(200 characters max. Please provide documentary evidence to support this application).* | | | | | |
|  | | | | | | | |
| 5. | **Please indicate the below items for which you wish to apply for this fund.** | | | | | |
| **ITEM** | | | **DETAILS** | | | |
| Information Technology which may include the following:   * Laptop * Tablet * PC * Printer * Software relevant to your course * PC Camera/Headset/Speakers | | | Please provide make and model of device and relevance to course: | | | |
| Please attach proof of purchase to this application form. Applications which do not provide proof of purchase will not be considered. This purchase must have taken place between 02nd June 2022 and the 14th October 2022. | | | | | | |

**I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(**Full Name Block Letters**) hereby confirm that the information provided herein is accurate, correct and complete and I consent to the processing of my data by LOETB.**

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

**(Learner Signature)**

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

**(Parent Guardian Signature if under 18)**

|  |  |  |
| --- | --- | --- |
| **CENTRE/SERVICE MANAGER USE ONLY** | | |
| **Date application received:**  **Closing date 14.10.22** |  | |
| **Recommended:** | **Yes** | **No** |
| **Signed by Centre/Service Manager:** |  | |

|  |  |  |
| --- | --- | --- |
| **FMT USE ONLY** | | |
| **Application Approved:** | **Yes** | **No** |
| **Signed by Centre/Service Manager:** |  | |
| **Date:** |  | |

|  |  |  |
| --- | --- | --- |
| Amount to be Awarded | | |
| **ITEM** | **Applied for / Eligible** | **Amount** |
|  |  |  |
|  |  |  |
|  |  |  |
| TOTAL TO BE AWARDED |  |  |

**DATA PROTECTION**

Laois and Offaly Education and Training Board [LOETB], Castle Buildings, Tullamore, Co. Offaly is a data controller under the General Data Protection Regulations and the Data Protection Acts 1988 - 2018. The Data Protection Officer for LOETB can be contacted at [dpo@loetb.ie](mailto:dpo@loetb.ie).

The personal data supplied on this application form and further documentation sought to evidence the answers provided in this form, are required for the purpose of:

* Verification of identity and address
* Verification of socio-economic status
* Centre administration

all of which are tasks carried out to enable LOETB to identify learners most in need of assistance.

Failure to provide the requested information may result in the application being deemed invalid and an offer of assistance may not be made.

The personal data disclosed in this form may be communicated internally within LOETB for the purpose of determining the eligibility of the applicant to receive assistance. Such processing of personal data is carried out pursuant to Article 6(1).(a) of the GDPR such that the data subject consents to the processing of his/her data. The processing of special category data is processed pursuant to Article 9(2).(a) of the GDPR such that the data subject has given explicit consent thereto.

The personal data provided in this Application Form will be kept for 1 year upon completion of the programme unless there is a statutory requirement to retain some or all elements of the data for a further period or indefinitely, in line with LOETB’s Data Retention Schedule, which can be found at www.loetb.ie .

A copy of the full LOETB Data Protection Policy is available at <https://www.loetb.ie/data-protection>.

If you as a data subject have any complaints regarding the processing of your personal data, you have the right to lodge a complaint with the Data Protection Commission.