

**COISTE GAIRMOIDEACHAIS CHONTAE NA GAILLIMHE
(CO. GALWAY VOCATIONAL EDUCATION COMMITTEE)**

COMMUNITY EDUCATION GRANTS

To Promote Development of Community and / or Enhance Community Education

APPLICATION FORM 2012

Closing date for receipt of Application: 10 February 2012

Section 1. – Details of Application Organisation:
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1. **Name of Group:** _____

2. **Address:** _____

3. **Contact details:**

Telephone Number: _____

Email address: _____

4. **Date of Establishment of Group:** _____

5. **Group Officers:**

Chairperson: _____

Treasurer: _____

Secretary _____

6. **Does your Group have a Constitution?** _____

(If so, please include as part of your application)

7. Aims and Objectives of your Group

Section 2. - Project Details:

8. Details of Proposed Project: _____

9. Expected Outcome of the Project:

1. _____

2. _____

3. _____

Other:

10. Certification Offered to Learners (If any): _____

11. **Estimated Numbers to be catered for:** _____

12. **Name of Tutor:** _____

Qualifications of Tutor: _____

13. **How will this Project benefit the group targeted?**

1. _____

2. _____

Other _____

14. **How will this Project benefit the community?**

1. _____

2. _____

Other _____

15. **Detail cost of project:**

Details	Cost

16. **Total Estimated Cost:** _____

17. Please state amount of income towards cost of project from any other source, including contribution from group members:

Source of funding	€Amount	€Total

18. Amount of Grant being requested in 2012: _____

19. Teaching Hours: _____

20. Group Tax Number: _____

Signed : *Chairperson*: _____

Date: _____

Please send completed form(s) to:

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