

# Final Course Acceptance Form - FA1

## Undergraduate or Postgraduate Course in Ireland

This form should be completed after you have made your final acceptance of a place on an approved full-time undergraduate or postgraduate course in Ireland and have applied for a student grant for 2010/11.

### Part 1 – Candidate’s personal details

Your Name: \_\_\_\_\_

Your Home Address: \_\_\_\_\_

Your PPS No:

Your Date of Birth:

Your Telephone No: Mobile: \_\_\_\_\_ Home: \_\_\_\_\_

### Part 2 – Course details and sources of student financial assistance

The approved full-time course which I have accepted and will pursue in 2010/11 is as follows:

Title of Approved Course: \_\_\_\_\_ Name of College: \_\_\_\_\_

Address of College: \_\_\_\_\_

Level of Course:   
 Undergraduate:  Level 6  Level 7  Level 8   
 Postgraduate:  H Dip.  PG Diploma  Master  PhD

Is this course an “add on” course? Yes  No

Course Duration: 1 year  2 years  3 years  4 years  more than 4 years

Course Year in 2010/11: Year 1  Year 2  Year 3  Year 4  Year 5

CAO Course Code (where applicable): (e.g. AL001) \_\_\_\_\_  
 (please attach a copy of CAO/College offer)

Please confirm if this course is full-time: Yes  No

Have you applied for or will you be getting a Back to Education Allowance (BTEA) or a Vocational Training Opportunities Scheme (VTOS) payment for the 2010/11 academic year? Yes  No

Have you applied for or will you be getting any other student financial assistance from Ireland or abroad for the 2010/11 academic year? Yes  No

If **Yes**, please give details of all awards/funds from the awarding/funding body or Department and the full amount, including fees, that you will get in 2010/11:  
 \_\_\_\_\_

### Part 3 – Declaration and Signature

**Declaration:**

I certify that the above information is correct and that the course I am attending is a full-time course.

I undertake to notify the local authority/VEC in my home area immediately of any change in my course, college or institution, duration, attendance pattern, social welfare entitlement or other student financial assistance.

I will also notify the local authority/VEC if I defer attendance on this course or if, having commenced the course, I cease to continue to attend.

Signature of Candidate: \_\_\_\_\_ Date: \_\_\_\_\_

**Please note this form must be completed in full and returned to your local authority/VEC.**