

APPLICATION FOR BURSARY

2019 PROFESSIONAL PRACTICE COURSE I

Notes

1. Please ensure that all questions on this form are answered.
2. All salaries or other income should be given as **gross** figures i.e. before tax has been deducted.
3. Payment of fees may not be suspended pending a decision on this application.
4. Your application, together with supporting documentation, must be received not later than **5.00pm on Friday 20 September 2019.**

Late applications will not be considered.

*Please email your application and any supporting documentation to p.sheedy@lawsociety.ie.
If possible, please password your document using your Trainee ID Number as your password.*

You will receive an acknowledgement within one week of the application deadline. If you do not receive an acknowledgement within this time please contact Paula Sheedy

BURSARY APPLICATION

Please complete this form in block letters using black pen.

SECTION 1: PERSONAL INFORMATION

Name	
Address (for correspondence in relation to this application)	
Telephone Number	
Email	
Date of Birth	
Date of Traineeship Deed	
Traineeship No	

SECTION 2: FINANCIAL INFORMATION

If you or your spouse/partner or parents have more than one source of income, please list all incomes and amounts received for the year ended **31 December 2018**.

Please provide details of your parents' income regardless of whether you are living with or depending on your parents for support. *All salaries or other income should be given as **gross** figures i.e. before tax has been deducted.*

	Self	Spouse/Partner	Father	Mother
Occupation or if not in employment please give most recent occupation.				
Income from employment (e.g. salary, wages, fees, etc.)				

	Self	Spouse/Partner	Father	Mother
Income from self-employment.				
Income from pension (from former employer or pension scheme).				
Income from land: profits from farming activities.				
Rental income e.g. profit from rental of property, land etc.				
Income from Department of Social Protection (DSP)				
DSP – Jobseekers Benefit Short-term (JB)				
DSP Job Seekers Allowance (JA)				
DSP Job Seekers Transitional payment (JST)				
One Parent Family Payment				
DSP Pension Payment. Please specify:				
DSP Supplementary Welfare Allowance				
DSP Illness Benefit				

DSP Disability Allowance				
DSP – Partial Capacity Benefit				
Other DSP Payment Please specify:				
Income from any other source. Please specify:				

Traineeship

What salary (before tax) per month have you received from the office in which you are apprenticed?	€_____
Will your office pay you any salary while you are attending the PPCI?	Yes/No_____
If yes, please state the amount (before tax) you will be paid per month.	€_____
Will your office pay all or part of your PPCI fee?	Yes/No_____
If Yes, please state amount.	€_____

Grants

Are you in receipt of Local Authority/SUSI funding?	Yes/No_____
If yes, please provide total amount.	€_____
If you are not in receipt of such funding please state why.	

Have you applied for any other grants, scholarships or awards?	Yes/No_____
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If yes, please give details.

Have you availed of any funding towards your education in the past? If yes, please give details.

Yes/No_____

Loans

Please provide full details of any debt.

Name of Lending Institution	Amount of Initial Loan	Current Balance	Monthly Repayments

Please provide a letter from each of the lending institutions to vouch for the above matters. Your application cannot be considered without this information.

Accommodation

Please give cost of rent or mortgage per month €_____

Travel Costs

Please give monthly cost of travelling to and from the Law School €_____

Other Information

Please include here any other details that have not been supplied in previous sections which you feel would support your application. Please continue on a separate sheet if necessary.

[illegible]

[illegible]

Declaration By Applicant

I certify that the facts in this application provide an accurate and complete statement of my financial situation and I say that my own resources and those of my family are not adequate to meet the cost of the fees payable to the Law Society of Ireland and to maintain me during the Professional Practice Course I. I therefore apply for financial aid to enable me to attend that course.

Signature of Applicant _____ Date _____

Declaration By Parents or Guardian

I declare that the foregoing particulars are true in every respect.

Signature of Parent/Guardian _____ Date _____

Address _____

Declaration By Training Solicitor

This section must be completed by your training solicitor or by some other reputable person in a position to vouch your circumstances.

I confirm that the foregoing particulars are true to the best of my knowledge and belief and I also recommend the applicant for a bursary.

Name	
Position	
Name of Firm	
Address	

Signature of Training Solicitor _____

Date: _____