



Comhairle Ceantair
an Iúir, Mhúrn
agus an Dúin
Newry, Mourne
and Down
District Council

Scéim Sparánachta na Gaeilge 2018/2019
Irish Language Bursary Scheme 2018/2019

This form is also available in Irish

1. Applicant details

Applicant's Name:	
Parent's/Guardian's name (if applicable):	
Applicant's Date of Birth:	
Contact Details: (if applicant is under 18, please provide a parent's or guardian's details)	Address:
	Town:
	County:
	Postcode:
	Email:
	Mobile number:
Home number:	

2. Course details

Please give details of the course for which you are seeking a Newry, Mourne and Down District Council Irish Language Bursary

Name of Course:	
Address:	
Start date:	Finish Date:
Contact Details for Course (telephone and/or email):	
Total Cost of Course:	Amount of funding sought:

3. Course Benefits

Please describe how the course will help develop your language skills

4. Re: Public Funding (please delete as appropriate)

I have / have not made an application seeking public funding towards attending the course (eg Líofo bursary)

5. Eligibility Criteria

Please confirm, by ticking each section, that you meet the eligibility criteria for the award of a Newry, Mourne and Down District Council Irish Language Bursary

I am a resident in the Newry, Mourne and Down District Council area	<input type="checkbox"/> yes	<input type="checkbox"/> no
I am registered to attend the course to improve my Irish language skills	<input type="checkbox"/> yes	<input type="checkbox"/> no
I am not in receipt of a scholarship/bursary from public funds to attend the course (eg Líofo bursary)	<input type="checkbox"/> yes	<input type="checkbox"/> no
The bursary requested does not exceed 50% of total fees for the course up to a maximum of £300	<input type="checkbox"/> yes	<input type="checkbox"/> no
I confirm the course will be completed within the current financial year under consideration (1 April – 31 March)	<input type="checkbox"/> yes	<input type="checkbox"/> no
I confirm I will complete the course and will provide proof of payment of course fees and attendance	<input type="checkbox"/> yes	<input type="checkbox"/> no

6. Declaration

I confirm that the information I have provided is true and accurate to the best of my knowledge

Applicant's Signature	Date
Signature of Parent/Guardian (if applicable)	Date

Please return the application form to:

**Irish Language Unit
Newry, Mourne and Down District Council
O'Hagan House
Monaghan Row
Newry
BT35 8DJ**