Application form for the

O'Brien Twin Sisters Educational Trust Fund

Please answer **ALL** questions. This form is confidential.

1. Nature of application
From a school, relating to an individual child Application in relation to a school project If yes, refer to 2. below Application from another person or organisation on behalf of an individual child Application from another person or organisation relating to the provision of educational services If yes, refer to 4. below If yes, refer to 5. below
2. Application from a school relating to an individual child
Name of child Age School School Roll number, if applicable Specify whether the school is under the trusteeship or patronage of the Archbishop of Dublin or, in the case of a VEC, whether the Archbishop sits on its Board of Management
Type of funding required a. School costs b. Educational assessment c. Extra-curricular activity d. Other Amount of funding requested Please provide additional details to support the application setting out how the grant will facilitate the education of the child and prevent educational disadvantage

3. Application from a school, relating to a school project
Name and address of school
Specify whether the school is under the trusteeship or patronage of the Archbishop of Dublin or, in the case of a VEC, whether the
Archbishop sits on its Board of Management
Is the school part of DEIS (Delivering Equality of Opportunity in Schools)?
Purpose of funding request
(further information, including the name of the project, setting out how the provision of funding will enhance the education of needy children whose education might be neglected without such funding can be provided under Section 8. Supplementary Information)
Amount of Funding requested D Current reserves of school operating bank account D
4. Application from a parent/guardian on behalf of a child
Name of child Age
School School
Class
PPS number of child
Type of funding required
a. School costs c. Other
b. Educational assessment d. Amount of funding requested
Please provide additional details to support the application setting out how the award of funding will enhance the education of your Catholic child whose education might be neglected without such funding.
Referee Details
Name Position
Contact Details
The referee may be one of the following (local clergy, school prinicipal, your GP, a member of An Garda Siochana or your community health nurse).

5. Application from another person or organisation relating to the provision of educational services
Name of person/organisation
Are you a registered charity?
If yes, please provide your CRA number
Purpose of funding request
(Further information may be included on the supplementary section at the end of the form) Amount of Funding requested D
Please provide additional details to support the application setting out how the award of funding will enhance the education of needy children whose education might be neglected without such funding.
Referee Details
Name Position
Contact Details
6. Further information required for all applications
Has funding for this purpose been requested from other organisations or bodies? Yes No
If yes, please give details, including any response and the year the request was made.

7. Supplementary Information to support the application (if required)
DECLARATION
DECLARATION
Name of applicant
I declare that the information given by me on this form is truthful and complete. I understand that if any of the information I provide is untrue or misleading or if I fail to disclose any relevant information, I will be required to repay any grant I receive from the Trust. I also
undertake to immediately advise you of any change in circumstance which may affect ongoing entitlement to the grant once awarded.
Cignatura(a) (not block letters)
Signature(s) (not block letters)
School Principal AND Chair of Board of Management
(School applications must be signed by both the Principal and the Chair of the Board of Management.)
■ Parent/Guardian of a child
■ Another Person/Organisation
Date D D M M Y Y

Please send the completed application form to:

Margaret Doherty

Dublin Diocesan Offices

20-23 Arran Quay

Dublin 7, D07 XK85

Or by email to: margaret.doherty@dublindiocese.ie