

APPLICATION FORM 2017/2018

NAME _____

ADDRESS: _____

EIRCODE _____

DATE OF BIRTH: _____ P.P.S. No. _____

TELEPHONE No: _____ MOBILE _____

E-MAIL _____

ARE YOU REGISTERED WITH INTREO (DEPT OF SOCIAL PROTECTION) YES: NO:

Please indicate any Social Welfare Allowance you are receiving _____

If unemployed, please indicate duration

Less than 12 months *More than 12 months*

EDUCATION TO DATE _

Indicate highest education level achieved from list below (✓ one only)

Primary Education	
Lower Second Level Education (5 Ds in Group Certification/Junior Certificate or equivalent) FETEC level 3 or Equivalent (Full Award)	
Upper Second Level Education (5 Ds in Leaving Cert or equivalent) FETEC Level 4/5 or Equivalent (Full Award)	
FETAC Level 6 (Full Award) or 3rd level qualification	

PREVIOUS WORK / COMPUTER EXPERIENCE (if any)

Where did you hear about the course? _____

CAN YOU COMMIT YOURSELF TO A FULL TIME COURSE:?

(9-4.30 MON TO FRI) YES: NO:

YOUR NEXT STEP:

CONTACT YOUR LOCAL INTREO OFFICE TO REGISTER YOUR INTEREST IN THE COURSE:

Intreo & Employment Support Services, Department of Social Protection,
Shannon Lodge, Carrick-on-Shannon, Co. Leitrim

Ph: 071 96 72343