The 1916 Bursary

Income from Designated Programmes Form

For income from Community Employment (CE), TUS or Rural Social Scheme (RSS), please ask your employer to complete this form.

Applicant's Name:	
Bursary Application Number:	
Employee's Name:	
Employee's PPS Number:	
Employer's Name:	
Employer's Address:	

Please indicate the type of programme to which this employment refers:

Community Employment Scheme (CE) ○

Community Work Placement Initiative (TUS) ○

Rural Social Scheme (RSS) ○

Other ○

Details of 'Other' programme (if applicable):

Please provide dates for employment on this scheme:	
Date From: (DD/MM/YYYY)	Date To: (DD/MM/YYYY)

Please provide details of payment:	
Weekly Rate:	**€**
Year Total:	**€**

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Please tick if payment included amounts for:	○ Qualified Adult ○ Qualified Child
Name of Qualified Adult (if in respect of a party to the SUSI Grant Application):	
Total Amount paid for Qualified Adult:	€
Name of Qualified Child (If in respect of SUSI Grant Applicant):	
Total Amount paid for Qualified Child:	€

Signature of Employee: _____

Date: _____

Signature of Employer: _____

Date: _____

Company/Employer Stamp:

Please Note: Forms that are not signed and stamped by all parties will not be accepted.