

# Request for Information

## from the Department of Social Protection

### Part 1: To be completed by Applicant's Parent(s)/Guardian(s)/Spouse

I authorise the release of information outlined below for the purpose of assessing a DCU Access Supports Application.

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Mother/Guardian/Spouse's Signature

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Father/Guardian/Spouse's Signature

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### Part 2: To be completed by your Local Social Welfare Office

DCU Access Service run a scheme for students from socio-economically disadvantaged backgrounds. School leavers who present satisfactory evidence relating to their socio-economic circumstances and satisfy academic requirements are eligible to compete for a quota of places allocated on a reduced leaving certificate points/subsidised accommodation basis.

To facilitate applicants in submitting required evidence, the Department of Social Protection (DSP) is requested to provide TWO pieces of information in respect of the person(s) named above:

1. Was the parent/guardian spouse in receipt of a means-tested (social assistance) payment(s) for at least 26 weeks in 2015?
2. What was the total (excluding child benefit, early childcare supplement and supplements paid under SWA scheme) social welfare income received by the parent(s)/guardian(s)/spouse in 2015?

Applicants must submit this information in relation to BOTH parents/guardians where applicable.

Please be advised that certification cannot be accepted unless it is both signed and stamped by a DSP official. Failure to submit appropriately verified information will result in the applicant being ineligible.

Mother/Guardian/Spouse Name:

PPS Number:

In receipt of means-tested social assistance for at least 26 weeks in 2015?  YES  NO

Total Social Welfare Income\* paid to this PPS number in 2015? € \_\_\_\_\_

Father/Guardian/Spouse Name:

PPS Number:

In receipt of means-tested social assistance for at least 26 weeks in 2015?  YES  NO

Total Social Welfare Income\* paid to this PPS number in 2015? € \_\_\_\_\_

\*Child Benefit, Early Childcare Supplement & any Supplements paid under the Supplementary Welfare Allowance Scheme should be excluded from the total income figure.

\_\_\_\_\_  
Signed on behalf of DSP (please print your name)

\_\_\_\_\_  
What is your position in DSP?

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

DSP Official Stamp

**Form not valid unless stamped**

### Part 3: To be completed by Applicant

Applicant's Name:

Applicant's CAO Number:

Applicant's Date of Birth:  /  /19

Applicant's PPS Number:

Keep copies of all documents, Submit all documents by 5.00pm, Friday 28, April 2017 to:  
Access Service, CG71, Henry Grattan Building, DCU, Glasnevin, Dublin 9.