

## **Back To Education Initiative**

## STUDENT INFORMATION Private & Confidential

Course Title:	<u>FIT – 4 – FET</u>
Name:	
Address:	
PPS No. (RSI No.):	
Phone Number:	
Mobile Number:	
Nationality:	
Date of Birth:	
Sex:	Male 🗆 Female 🗆

Current Status: Please Tick ✓

Are you a Medical Card holder?	Are you a dependant of a Medical Card holder?	Are you receiving any type of Social Welfare payment?
Are you a dependant of a Social Welfare recipient?	Are you employed (Full Time)?	Are you employed (Part Time)?
Not in the Labour Market	Do you have your Leaving Certificate?	

## Any other Relevant Information:

Signed:\_\_\_\_\_

Date: \_\_\_\_\_

Please return to: Please return to: Patricia Britton, BTEI County Co-ordinator, ETB Adult Education & Guidance Offices, 2<sup>nd</sup> Floor, Mc Kendrick House, Mc Kendrick Place, Pearse Road, Letterkenny. Phone 074 9178088 email <u>patriciabritton@donegaletb.ie</u>



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