



An Roinn Oideachais
Department of Education

**Application Form for Additional School
Accommodation for POST PRIMARY SCHOOLS
Form ASA**

*(This form must only be completed in respect of urgently
required additional school accommodation)*

1. BASIC SCHOOL DETAILS

1.1

School Name:			
Address:			
County:		Eircode:	
School Roll No 	School Telephone No 	School e-mail address 	
Principal's Name			

1.2 Please give details of contact person

Name	
Role in school	
Phone number	

Portlaoise Road, Tullamore, Co. Offaly, R35 Y2N5
Email: ASAapplications@education.gov.ie / Telephone: 057 9324300

2. APPLICATION DETAILS

Application for grant aid towards additional school accommodation
Schools Capital Appraisal Section, Planning & Building Unit, Department of Education

2.1 Give details of accommodation for which grant-aid is being sought
(e.g. prefabricated structure, existing premises, new build etc)

2.2 Indicate why additional accommodation is required? (select one or more)

New Mainstream Teacher(s)	If yes, insert number of new mainstream teachers <input type="checkbox"/>
New Special Education Teacher(s)	If yes, insert number of new special education teachers <input type="checkbox"/>
Other reason, please specify e.g. other new appointment, replacement building etc	 <hr/> <hr/> <hr/> <hr/>

2.3 Date from which accommodation is required

(DD / MM / YYYY)

Site Details

2.4

Please submit a Site Map with boundary outlined in red.	
Who owns the site?	
Size of site (approx.)	_____ Hectares or _____ Acres
If a new build or prefabricated structure is considered the appropriate solution is there sufficient space on site, if sanctioned?	Yes <input type="checkbox"/> No <input type="checkbox"/>

Status of School Provision

2.5

Recognition:	Temporary <input type="checkbox"/> Permanent <input type="checkbox"/>
Has another application for a building project been submitted to the	Yes <input type="checkbox"/> No <input type="checkbox"/>

Department or is there a building project ongoing?	
If yes, please provide details	
If a building project is ongoing please state estimated completion date?	DD / MM / YYYY / /

3. ENROLMENT DETAILS

3.1

Current enrolment as at 30 September 20____ (as per last Post-Primary Online Database (PPOD) returns)	
Projected enrolment for next September 20____	
Projected enrolment for the following September 20____	

4. TEACHING STAFF :

In certain circumstances, the Department may request the following additional information from the school;

- 4.1. Copy of Teacher Allocation form.
- 4.2. Classroom Timetables for School.

5. SCHOOL ACCOMMODATION DETAILS

5.1 Please give details of existing accommodation and current use
(attach an additional sheet if necessary):

M ²	Actual size m ²	Number of permanent classrooms	Current use of each room as applicable		
<40					
≥40<50					
≥50					
	Actual size m ²	No. of prefabricated / portacabin classrooms	Current use of each	Monthly rent (if not owned)	Name of landlord/ supplier

5.5 Is there any other user operating from the school premises
or located on the school site?

Yes ☐ No ☐

If yes, please give details including arrangements between school and pre-school/other operator.

M ²	Permanent or prefab	Current Use	Previous use of area	Monthly rent received (if applicable)

Please submit the additional information;

- ✓ A complete current accommodation inventory, including room sizes (Appendix B Form which is available on the website)
- ✓ A set of up-to-date Floor Plans with the identities and dimensions for all spaces (metric) - ideally these should be architectural drawings. These must correspond with Appendix B Form.
- ✓ Ordnance Survey Map showing school site.

6. Additional Information

Any additional supporting documentation must be securely attached to the back of the application form and listed below. This page can also be used for any other information relevant to the application.

Attachments Enclosed

☐

Site Map

☐

Enrolment Policy

☐

Appendix B with corresponding Floor Plans (form available in website) |

Other Relevant Information

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Please note:

- **Information provided is subject to the Freedom of Information Act 2014**
- **A copy of the enrolment policy of your school must be included with this application** (see section 15 (2)(d) of the 1998 Education Act as amended by Education (Admission to Schools) Act 2018).

DECLARATION AND CERTIFICATION

We hereby apply for grant-aid for the additional school accommodation as described in Section 2: Application Details.

We are aware of and agreeable to the condition that if this application is successful and results in the provision of capital funding; that this funding must be secured legally.

In accordance with Section 15 of the Education Act 1998 (as amended), we certify that this Board of Management has consulted with the Patron/Trustees. We confirm that, where applicable:-

- (i) the application has the approval of the Patron/Trustees
- (ii) the application has the support of the Board of Management
- (iii) the proposed project is to be carried out within the confines of the vested school area.

We certify that all of the information given in this application is true and complete to the best of our knowledge and any material change in circumstances will be **notified immediately** to the School's Capital Appraisal Section of the Department of Education.

We understand and declare that this application is made subject to contract and does not constitute, form part of or give rise to an agreement or contract with the Minister for Education.

CEO Name: _____ (block letters) **CEO of**
_____ **Education & Training Board**

Roll Number _____.

Signed: _____ **Date:** ____/____/20____

or

Chairperson's Name: _____ (block letters) **Chairperson,**
Board of Management of _____

Roll Number _____.

Signed: _____ **Date:** ____/____/20____

and

Principal's Name: _____ (block letters) **Principal**
of _____

Roll Number _____.

Signed: _____ **Date:** ____/____/20____

In the case of schools under Catholic Patronage specific Patron agreement is required

Patron's Name: _____ (block letters)

Signed: _____ **Date:** ____/____/20____