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| **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**

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| --- | --- | --- | --- |
| **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**](mailto:ASAapplications@education.gov.ie) / **Telephone: 057 9324300**

**2. APPLICATION DETAILS**

* 1. Give details of accommodation for which grant-aid is being sought

*(e.g. prefabricated structure, existing premises, new build etc)*

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

|  |  |
| --- | --- |
| **New Mainstream Teacher(s)** | If yes, insert number of new mainstream teachers 🞏 |
| **New Special Education Teacher(s)** | If yes, insert number of new special education teachers 🞏 |
| **Other reason, please specify** *e.g. other new appointment, replacement building etc* |  |

(DD / MM / YYYY)

* 1. Date from which accommodation is required

**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 🞏 No 🞏 |

**Status of School Provision**

**2.5**

|  |  |
| --- | --- |
| **Recognition:** | Temporary 🞏 Permanent 🞏 |
| **Has another application for a building project been submitted to the Department or is there a building project ongoing?** | Yes 🞏 No 🞏 |
| **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;***

1. Copy of Teacher Allocation form.
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):*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **M2** | **Actual size m2** | **Number of**  **permanent classrooms** | **Current use of each room as applicable** | | |
| **<40** |  |  |  | | |
|  |  |  | | |
|  |  |  | | |
| **≥40<50** |  |  |  | | |
|  |  |  | | |
|  |  |  | | |
| **≥50** |  |  |  | | |
|  |  |  | | |
|  |  |  | | |
|  | **Actual**  **size m2** | **No. of prefabricated / portacabin classrooms** | **Current use of each** | **Monthly rent**  **(if not owned)** | **Name of landlord/supplier** |
| **<40** |  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| **≥40<50** |  |  |  |  |  |
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| **≥50** |  |  |  |  |  |
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**5.2** Other accommodation*not included in previous table.*

Please **enter m2***(If rented please give details):*

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| --- | --- | --- |
|  | **m²** | **Rental Details (if applicable)** |
| **Principal’s Office** |  |  |
| **General Office** |  |  |
| **Staff Room** |  |  |
| **Multi-purpose Room** |  |  |
| **GP Room** |  |  |
| **Library** |  |  |
| **Others (Please specify)** |  |  |
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**5.3** Does the school currently have a universal access toilet? Yes 🞏 No 🞏

**5.4** If the school uses any other premises please give details:

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| --- | --- | --- | --- |
| **M2** | **Details** | **Current use of each** | **Monthly rent**  **(if applicable)** |
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**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.*

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| --- | --- | --- | --- | --- |
| **M2** | **Permanent or prefab** | **Current Use** | **Previous use of area** | **Monthly rent received (if applicable)** |
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***Please submit the additional information;***

* A complete current accommodation inventory, including room sizes ([Appendix B Form which is available on the website](http://www.education.ie/en/Schools-Colleges/Services/Building-Works/Additional-Accommodation/schedule-of-accommodation.docx))
* 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.

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| ***Attachments Enclosed***  Site Map  Enrolment Policy    Appendix B with corresponding Floor Plans (form available in website) |

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| ***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 Actas amended by Education (Admission to Schools) Act 2018). |

**DECLARATION AND CERTIFICATION**

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| 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:-   1. the application has the approval of the Patron/Trustees 2. the application has the support of the Board of Management 3. 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\_\_\_ |