



Bord Oideachais & Oiliúna
LUIMNIGH & AN CHLÁIR
LIMERICK & CLARE
Education & Training Board

Information and Guidelines for Completion of Community Education Grant Application Forms

Please complete all sections of the application form

Who may apply?

Funding is available to Community Groups/Organisations to provide education/training for adults within their own community with a focus on funding those without access to core funding. Priority is given to funding the following groups: women's groups, people with disabilities, men's groups, older people, Travellers and other ethnic minorities, rural smallholders, community arts groups, projects with a focus on homeless people and the reintegration of ex-prisoners.

What can Groups apply for?

Funding is provided in the form of tuition hours to deliver a specific education course from January – December 2021. Room hire, equipment, materials etc. are not eligible for funding. Groups are required to register through [FETCHcourses.ie](https://fetchcourses.ie) where a PPSN is a mandatory field, to include progression options and course outline forms for each programme.

Enrolment of Learners

All Learners must enrol online through [FETCHcourses.ie](https://fetchcourses.ie) (Further Education Training Hub).

For **new learners** to complete their online registration they require:

- An email address
or
- Mobile phone
- Valid photo ID (public service card, driving licence, passport or other photo ID)
- PPSN

Existing FETCH Learners

- Will need their **FETCH Username** and **Password** to log in and apply for the course.

FETCH registration will be supported by Limerick and Clare Education and Training Board FETCH Team and learners will be requested to bring all of the above on a designated registration day

Funding

Funding is dependent on allocation by SOLAS to Limerick and Clare Education and Training Board Community Education Service. It is not intended to fund existing services – either voluntary or paid, nor is it available on a continuous full-time basis. Priority is always given to community and voluntary groups with no core funding.

Public Liability

Venues used must have Public Liability Insurance and comply with Health and Safety Regulations. A copy of the public liability insurance will be required for our records prior to commencement of the course.

Closing Date

The closing date for receipt of Application Forms is **Friday, December 4th 2020**.
Queries only to: breda.odriscoll@lcetb.ie or 065 6824819

***Please note Application Forms are not acceptable by fax or email**

Please Return Completed Application Forms to:

**Community Education and Training,
Limerick and Clare Education and Training Board,
College of Further Education and Training,
Ennis Campus,
Clonroad Business Park,
Ennis,
Co Clare,
V95 KT95**

Community Education Grants Scheme 2021

Funding January 2021 – December 2021

APPLICANT DETAILS

1.1 Name of *Course Organiser: _____

1.2 Address of Course Organiser: _____

1.3 Tel. Number (Main contact): _____ Fax: _____

1.4 Email: _____

Tel. Number (Mob.): _____ (Contact number(s) must be provided)

***Please note Course Organiser is responsible for maintaining course records (FETCH registration, records of attendance and evaluation forms are completed and returned to the CEF on time. The organiser may request the tutor to do this.)**

GROUP AND COURSE DETAILS

2.1 Name & Address of Group: _____

2.2 Name of Venue: _____

2.3 Address of Venue: _____

2.4 Please indicate which groups participants are in:

Women's group People with disabilities

Men's group Older People

Travellers & other Ethnic Minorities One Parent Families

Low Skilled People outside Labour Force Homeless People

Dependant on those who are unemployed Reintegration of ex-prisoners

Other, please explain: _____

2.5 Please outline why your group is in need of this programme: _____

2.6 No. of Participants: _____
Males: _____ Age Profile: 18 -24 _____ 25-44 _____ 45-64 _____ 65+ _____
Females: _____ Age Profile: 18 -24 _____ 25-44 _____ 45-64 _____ 65+ _____

2.7 Please outline the type of course the group wishes to undertake and why:

2.8 Please outline the activities of your group to date:

2.9 If your Group is a new group, please outline what you want to do:

2.10 What are the progression plans for this group: _____?

(For example, further certified learning; establishing as a sustainable inclusive community arts/development, leisure activity group; involvement in local activity/volunteering/ etc.)

COURSE EVALUATION AND PROGRESSION

3.1 Please outline how you will evaluate the Course to see if it has achieved its Objectives:

**(Groups will be required to complete an evaluation & progression form provided by
Limerick and Clare Education and Training Board)**

TEACHING HOURS

- 4.1 No. of sessions: _____
- 4.2 Duration of each session: _____
- 4.3 Total number. of teaching hours requested: _____
(A Tutor will be identified by Limerick and Clare Education and Training Board from the Community Education Panel of Tutors)
- 4.4 Proposed **start date** and **time of day** of course: _____
-

ADDITIONAL INFORMATION

- 5.1 Please outline the supports or materials your organisation will provide to assist the education programme: _____

- 5.1(A) Please outline how you will provide reasonable accommodation for the education programme:

- 5.2 Have you applied for funding from any other source? If so please give details:

- 5.3 Is the venue being used to host the course covered by public liability insurance?

- 5.4 Are all requirements as set out under the Safety, Health and Welfare at Work Act of 2005 and the Safety, Health and Welfare at Work General Application Regulations of 2007 and all other relevant safety and health legislation complied with in the provision of the venue and organisation of the course?:
-



5.5 Please outline any additional information that you feel may assist your application:

5.6 Please outline what value you think this course will bring to your community.

5.7 Is it important to have this course locally?

Why?

I certify that the above information is correct

Signed: _____

Date: _____

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Insurance/Health and Safety Statement

The venue being used for course delivery is covered by public liability insurance:

Yes _____ No _____

The venue being used complies with Health and Safety Regulations as set out under the Safety, Health and Welfare at Work Act of 2005 and the Safety, Health and Welfare at Work General Application Regulations of 2007. All other relevant safety and health legislation is complied with in the provision of the venue and the organisation of the course:

Yes _____ No _____

Signed for on behalf of Community Group: _____

Position: _____

Date: _____