WICKLOW COUNTY COUNCIL &
WICKLOW SPORTS & RECREATION PARTNERSHIP

KATIE TAYLOR BURSARY FOR THIRD LEVEL EDUCATION 2026-27

Comhairle Contae Chill Mhantáin
Wicklow County Council

Wicklow Sports & Recreation Partnership
Comhpháirtíocht Spóirt agus Áineasa Chill Mhantáin
SPORT IRELAND

APPLICATION FORM

Applicants should ensure they are familiar with the terms and conditions of the scheme before completion of this application form.

Please **type your responses or complete the form clearly in black pen**, to ensure your statement is legible. **E-signatures are accepted.**

The application should be completed as follows:

- **PART 1 -** By the applicant
- **PART 2 -** By a parent/guardian of the applicant
  or
  By the applicant if a mature student
- **PART 3 -** By the applicant's referee

Please return fully completed application forms by 12 noon on Monday 4th of January 2027.

TO:
Wicklowlsp@wicklowcoco.ie

OR

Wicklow Sports & Recreation Partnership, Wicklow County Council, County Buildings, Wicklow, Co. Wicklow.

Wicklow County Council will:

- Use the information provided on the application form to assess the suitability and eligibility of the applicant
- Seek additional information from applicant or referee if necessary
- Shortlist applicants according to information supplied on the application form
- Contact successful applicants in a timely manner
- Hold selection interviews for shortlisted applicants

APPLICATION FORM - PART 1

(To be completed by applicant)

PERSONAL DETAILS

Surname: (as on Birth certificate)	
First Name(s):	
Date of Birth:	
PPS Number:	

Home Address:	Correspondence Address (if different from home address)
Phone:	Mobile:
E-mail:	

DETAILS OF INVOLVEMENT IN SPORTS

Name of Club/Type of sport	List any distinguishing achievements

SECOND LEVEL EDUCATION

School(s) Attended:	From	To

DETAILS OF OTHER QUALIFICATIONS (SPORTS RELATED OR OTHER)

Course Name	Year	Result (If applicable)

CANDIDATE'S CURRENT THIRD-LEVEL COURSE 2026/27
Your course does <u>NOT</u> need to be sports-related

Course Level (7 or 8)	Course Title	College/University	Current year of study	Course Code

College/University Student Number

Please attach confirmation of your accepted place or proof of enrolment showing your name, institution and Level 7 or Level 8 degree course for 2026/27. If this document does not confirm that you are currently in first year, please provide separate confirmation.

HIGHER EDUCATION GRANTS

Have you applied for, or are you receiving, a Higher Education Grant (e.g. SUSI) for the 2026/27 academic year?

Yes ☐ No ☐

An application for a Higher Education Grant **will not** be a barrier to the award of a bursary.

In addition to this bursary are you applying for any other scholarship/bursary?

Yes ☐ No ☐

If yes, please give details:

Wicklow County Council will liaise with other Bursary/Scholarship providers to ensure non-duplication of the Bursary Award.

CURRENT EMPLOYMENT DETAILS (If any)

Name of Employer/Type of Work	Employment Dates	
	From	To

PERSONAL STATEMENT

The information provided in this statement will form part of Wicklow County Council's assessment of your application for short-listing and subsequent interview.

SECTION A should include:

- Details of your sporting interest and achievements.
- Your interest in your chosen course and evidence to demonstrate this interest.
- Your personal strengths and experiences which you believe will help you to succeed at college.
- Details of any employment, work experience, placement or voluntary work which you consider support your application.
- Any other interests or achievements.
- Any other information which you consider supports your application.

PERSONAL STATEMENT - SECTION A (maximum of 500 words)

SECTION B should:

- Outline any economic, social or other disadvantage, including disability, experienced by you or your household.
- Explain how the bursary would help you continue your studies and perform at a high level in your sport.

PERSONAL STATEMENT - SECTION B (maximum of 500 words)

- I declare that all the information supplied in this application is true and accurate
- I accept the terms and conditions of the Katie Taylor Bursary Award
- I authorise Wicklow County Council to make any necessary enquiries regarding this Higher Education Grant application.

Signature of Candidate: _____ **Date:** _____

APPLICATION FORM - PART 2

HOUSEHOLD CIRCUMSTANCES
(To be completed by Parent/Guardian OR applicant if a mature student)

The information provided in PART 2 will not be disclosed to any individual, agency or body.

APPLICANT'S NAME:

PERSONAL DETAILS:

	Father/Guardian Or Applicant (if mature student)	Mother/Guardian Or Applicant (if mature student)
Name in full		
Address		
Telephone No.		

EMPLOYMENT STATUS:
(Please tick as appropriate)

	Father/Guardian Or Applicant	Mother/Guardian Or Applicant
Employee		
Self Employed		
Unemployed		
Retired		
Other (please specify)		

OTHER HOUSEHOLD DEPENDANTS

Name	Age	Particulars e.g. full-time school, college student, person with disability, older relative etc.

Does your family hold:

Medical Card ☐ GP Only Card ☐

(This is not intended as an eligibility criterion)

ANY ADDITIONAL RELEVANT HOUSEHOLD INFORMATION

DECLARATION

I declare that the information supplied in PART 2 of this form is true and accurate.

Signature (Parent/Guardian or applicant, if a mature student):

_____ Date: _____

APPLICATION FORM - PART 3

ACADEMIC/SPORT REFERENCE

APPLICANT'S NAME:

REFEREE DETAILS:

Name	
School/Club	
Address	
Phone	
e-mail	
Position	

Are you related to the candidate Yes ☐ No ☐

How long have you known the candidate ☐ Years

ASSESSMENT OF APPLICANT

Your assessment of the all-round ability, potential and commitment of the applicant

Any other information you consider relevant to the application.

I declare that the information supplied is true and accurate.

Signature: _____ Date: _____