

## Details of Department of Social Protection (DSP) Income of a person who is not a party to a Grant Application Form

Applicant's Name				
SUSI Application Number				
Section A (To be completed by person who is not a party to the application and the applicant.)				
Name of Person (whose payment is to be considered) PPSN of Person				
Date of Birth of Person				
Address of Person				
Note to person whose income is to be considered  Your information will be used to verify the eligibility for the special rate of grant by confirming if you were in receipt of a special rate payment (as listed under Schedule 2 of the Student Grant Scheme 2025) and you held this payment on 31 December 2024. Any income you receive from the DSP will not be included as reckonable income under the Student Grant Scheme 2025. SUSI will verify this information by accessing a link with the DSP. Please sign your consent in the box provided below. Please refer to important notes below for further information.				
Consent of Person				
I consent to providing SUSI with the above information and for SUSI to process this information to verify details of payments I receive from the Department of Social Protection for the purposes of assessing the eligibility of the applicant named above to receive the special rate of grant. I understand that I can withdraw my consent at any time.				
Signed Consent of Person (whose payment is to be considered)		Date		



Signature of Applicant		Date
Section P		
Section B	amned by DSD if CDA or	ADA is paid)
To be completed and Sta	amped by DSP if CDA or A	ADA is paid)
Verification of Child Dep Allowance (ADA)	pendent Allowance (CD	A) / Adult Dependent
Allowance (ADA)		
-	-	or ADA is paid in relation to (see
mportant notes below for fur by the DSP.	ther explanation), SUSI requ	ires the following details verified
by the DSP.		
Name of Person		
(whose income is		
to be considered) *		
		1-
PPSN of person for whom ADA is paid in relation to	DSP Stamp	Date
		1
PPSN of person for whom CDA is paid	DSP Stamp	Date
in relation to (must		

If the eligible payment held is Working Family Payment, please confirm that the person ordinarily resides in the same household as the parent and/or applicant: Yes\_\_\_No\_\_

be the applicant)



## **Section C**

(To be completed and stamped by DSP if Guardian's Payment is paid to a person who is not the Legal Guardian of the applicant)

## **Verification of Guardian's Payment**

In order to verify the details of the person for whom Guardian's Payment is paid in relation to (see important notes below for further explanation), SUSI requires the following details verified by the DSP.

Name of Person (whose income is to be considered) **		
PPSN of person for whom Guardian's Payment is paid in relation to (must be the applicant)	DSP Stamp	Date

## **Important Notes**

This form should be completed where you (the applicant) have indicated to SUSI that there is a person in your household who is <u>not</u> party to your grant application but who is in receipt of a payment from the Department of Social Protection that may make you eligible for the special rate of grant.

\*Under Article 19(7)(b) of the Student Grant Scheme 2025 this person should be the spouse, civil partner, or cohabitant (not being your parent) of your parent (as named on your application) and must include an Adult Dependent Allowance in respect of your parent or a Child Dependent Allowance in respect of you

\*\*Under Article 19(7)(c) of the Student Grant Scheme 2025 this person should be a person (not a legal guardian) in receipt of a Guardian's Payment in respect of the applicant.

To enable SUSI to take account of this payment, we will access the Department of Social Protection records for this person. This form is required to be completed and returned to SUSI to allow us to do this. The name, address, date of birth, PPSN and signed consent of this person is required.

Please note that for this purpose ALL payments received by this person from the Department of Social Protection will be viewed. DSP payments made to such a person are not reckonable as income for the purposes of your application. However, the fact that they receive such payments may make you eligible for the special rate of grant.



Details of payments that may make you eligible for the special rate of grant are listed in Schedule 2 of the Student Grant Scheme 2025. Should you wish to withdraw your consent please email sar@susi.ie and mark for the attention of the Compliance Officer. Please include the SUSI application number, your name and detail that you wish to withdraw your consent.