



## Income from Designated Programmes Form

For income from Community Employment (CE), TUS or Rural Social Scheme (RSS), please ask your employer to complete this form.

<b>Applicant's Name</b>	
<b>SUSI Application Number</b>	
<b>Employee's Name</b>	
<b>Employee's PPS Number</b>	

<b>Employer's Name</b>	
<b>Employer's Address</b>	

Please indicate the type of programme to which this employment refers:

- |   |                       |
|---|-----------------------|
| Community Employment Scheme (CE)          | <input type="radio"/> |
| Community Work Placement Initiative (TUS) | <input type="radio"/> |
| Rural Social Scheme (RSS)                 | <input type="radio"/> |
| Other                                     | <input type="radio"/> |

**Details of Other Programme (if applicable)**

Please provide dates for employment on this scheme:

<b>Date From: (DD/MM/YYYY)</b>	<b>Date To: (DD/MM/YYYY)</b>

Please provide details of payment:

<b>Weekly Rate</b>	€
<b>Year Total</b>	€

<b>Please tick if payment included amounts for</b>	<input type="radio"/> <b>Qualified Adult</b> <input type="radio"/> <b>Qualified Child</b>
<b>Name of Qualified Adult (if in respect of a party to the SUSI Grant Application)</b>	
<b>Total Amount paid for Qualified Adult</b>	€



<b>Name of Qualified Child (If in respect of SUSI Grant Applicant)</b>	
<b>Total Amount paid for Qualified Child</b>	<b>€</b>

**Signature of Employee:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Signature of Employer:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Company/Employer Stamp**

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**Please Note:** Forms that are not signed and stamped by all parties will not be accepted by SUSI. This will result in delays when processing your application.