



Vocational Training Opportunities Scheme Statement (VTOS)

Student Grant Scheme Schedule 2 Designated Programme Payments

If you were in receipt of a VTOS payment during 2024, please download and complete this form. The Education and Training Board that administered the payment must complete Part B of this form. A signature and stamp is also required.

Statement of Vocational Training Opportunities Scheme (VTOS) Payments

Date of Payments	1 January 2024 to 31 December 2024
SUSI Applicant Name	
SUSI Application No.	

Section A: Personal Details of VTOS Payment Recipient

Relationship of VTOS Payment Recipient to SUSI Applicant

Relationship of VTOS payment recipient to SUSI Applicant	<input type="radio"/> Applicant <input type="radio"/> Father/Guardian <input type="radio"/> Mother/Guardian <input type="radio"/> Spouse/Civil Partner <input type="radio"/> Co-habitant
Name of Recipient	
Address of Recipient	
Recipient's Date of Birth	
Recipient's PPS Number	



Section B: Details of VTOS Payment

Section B must be completed by the Head Office of the ETB that administers the VTOS Payment

Please provide dates for all periods in which payment was made in 2024 and total amount paid.

From	To
From	To
From	To
Total VTOS Payment in 2024	€

Please tick if payment included amounts for	Qualified Adult <input type="radio"/> Qualified Child <input type="radio"/>
Total Amount paid for Qualified Adult	€
Total Amount paid for Qualified Child	€

Signed: _____
ETB Head Office

Date: _____

ETB STAMP
