



etb

Bord Oideachais agus Oiliúna
Átha Cliath agus Dhún Laoghaire
Dublin and Dún Laoghaire
Education and Training Board

Application for Waiver of Adult Education Course Fees

*Please note all sections **MUST** be completed and submitted to Head Office for approval before enrolment night/ day*

Name:																	
Phone:																	
Address:																	
Email Address:																	
Employee No:																	

I wish to apply for a waiver of fees for the following Adult Education Course:

Centre:	Term:	Course Title: (as detailed on website)	Fee:
			€

**Please note applicants may apply for a waiver of fees for one course per term.*

Signed: _____ Date: _____
Applicant's Signature

Approved application forms will be forwarded to the AEO/ Director of Adult Education in the centre of the course you will be attending and a copy will be sent to you.

FOR OFFICE USE ONLY

Confirmed Staff: Yes No Waiver approved: Yes No

Signature: _____ Date: _____

Authorised: _____ Date: _____