

Please attach a recent passport size photo of yourself here

Application to Access Programme Form 2025

Surname:			Date of Birth:				
First Name(s):			Country of Birth:				
Gender: Male	e 🔲 Female 🗆		Birtii.				
Home Address:		(Correspondenc	e Address	(if different):		
Home Phone:			Nork Phone:				
Mobile Phone:		E	E-mail:				
		EDUCAT	ΓΙΟΝ				
Have you ever atte	nded a third-level La	aw course?					
Yes 🗆 Year _	No 🗆						
If you attended a thi	rd-level course, plea	ase give the	following detail	s:			
Institution	Course Title	Year	Comple	tion Date	Leaving date (if different)		
Did you complete th	e course? Yes	□ No □					
If not, please provid	e details:						

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Did you receive Access funding as an undergraduate? Yes*	.aw? Pl	lease pro	ovide d	letails:				
Yes*								
If you received Access funding, please enclose a letter from your former 3 rd level institution confirming you were an Access student. Did you apply for or receive SUSI or Local Authority funding as an undergraduate? Yes No (please provide details) Have you availed of any other funding towards your Education in the past? Yes No (if yes, please provide details) Schools Attended (most recent first) Dates of Attendance From To Were any of these schools a DEIS school?	Did yo	u receive	Acce	ss fun	ding as an undergra	duate?		
Did you apply for or receive SUSI or Local Authority funding as an undergraduate? Yes	Yes*		No		(*please provide c	onfirmation of	f your pre	vious Access status)
Did you apply for or receive SUSI or Local Authority funding as an undergraduate? Yes							our forme	r 3 rd level
Yes							oc on unde	araduoto 2
Yes No (if yes, please provide details) Schools Attended (most recent first) Dates of Attendance From To Were any of these schools a DEIS school?		и арріу і □					is an unde	ri gi aduate :
Yes No (if yes, please provide details) Schools Attended (most recent first) Dates of Attendance From To Were any of these schools a DEIS school?								
Schools Attended (most recent first) Dates of Attendance From To Were any of these schools a DEIS school?	Have y	ou avail	ed of a	ny oth	er funding towards y	our Education	n in the pa	ist?
Were any of these schools a DEIS school?	Yes		No		(if yes, please prov	ide details)		
Were any of these schools a DEIS school?								
	School	ls Attend	led (m	ost red	ent first)	From	Dates of	
Yes □ No □ (if yes, please provide details)	Were a	ny of the	ese scl	hools	a DEIS school?			
	Yes		No		(if yes, please pro	vide details)		

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EMPLOYMENT

Are you currently employed?						
Yes ☐ Part-time ☐ Full-time	e 🗌 No 🗌					
Please provide details (start with me	ost recent):					
Place of Work Type of work Dates						
		From		То		
Are you an E.U. National?	Yes□ No □					
Or Have you been granted Refugee	Status? Yes ☐ Year granted	d	N	o 🗆		
g				- , 		
If not, do you require an education visa to study in Ireland? Yes ☐ No ☐						
Are you in a position to work in Ireland? Yes \square No \square						

OTHER

Particulars of Family Members* (i.e. parents, siblings and dependents)							
Surname, First Name	Relation to applicant (e.g. Father/ Mother)	Date of Birth: DD/MM/YR	Indicate (Yes/No) whether this person is currently resident in the family home	Highest Level of Education achieved to date. (i.e. Primary Education, Group/Inter/Junior/Leaving Certificate, PLC, Adult Education, Certificate, Diploma, Degree, Master Programme, etc.)	Current occupation or current place of study:		
		_	_				

^{*}Additional information can be added on an extra sheet attached to the application if required.

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		culars of Exte			
Surname, First Name	(i.e. Father's Relation to applicant (e.g. Aunt/ Uncle)	Date of Birth: DD/MM/YR	Indicate (Yes/No) whether this person is currently resident in the family home	Highest Level of Education achieved to date. (i.e. Primary Education, Group/Inter/Junior/Leaving Certificate, PLC, Adult Education, Certificate, Diploma, Degree, Master Programme, etc.)	Current occupation or current place of study:
			Home		
		IRRENT PLA		ned to the application if require	ed.
Home Owner			Private rented accommodation		
Local Authority Tenant Purchase Scheme			Local Authority rented flat		
Local Authority rented housing			Other non-permanent accommodation (please give details)		
County/Address					

Local Authority rented housing	(please give details)
County/Address	
Do you own additional property? If yes please provide details:	Yes No

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PLACE OF RESIDENCE GROWING UP

Please	tick	the	apr	oron	riate	box:

Home Owner	Private rented accommodation
Local Authority Tenant Purchase Scheme	Local Authority rented flat
Local Authority rented housing	Other non-permanent accommodation (please give details)
County /Address	
Did your Parent(s) own additional property of yes please provide details:	rty? Yes □ No □

FINANCIAL INFORMATION

Particulars of income from paid employment (including self-employment).

If you are residing with parents, please give details of their income*.

ii you are res	Sidilig W	itii pareiits, piease	give detail		<u>. </u>	
	Estimat	Estimated total income for the year ended 31 December 2024				
	Self	Spouse/Partner	Father	Mother	Documents Required	
Occupation					N/A	
Income from employment (e.g. PAYE – salary, wages, fees, etc.)					Employment Detail Summary / P21	
Income from pension (from former employer or pension scheme)					Notice of Assessments and Accounts	
Income from self-employment					Employment Detail Summary / P21	
Income from land: profits from farming activities					Notice of Assessments and Accounts	
Income from any other source. Please specify:					Relevant evidence	

^{*}If neither you/your spouse/partner/your parent(s) are in paid employment please go to next section

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	•	Complete where app	•		
	Estimated	d total income for the	year ended	31 December 2	
	Self	Spouse/Partner	Father	Mother	Documents Required
Current or most recent occupation					N/A
DSP – Jobseekers Benefit (JB) (Short-term)					P21 and Social Welfare Statement
DSP – Jobseekers Allowance (JA)					P21 and Social Welfare Statement
DSP - Jobseeker's Transitional payment (JST)					P21 and Social Welfare Statement
DSP – Supplementary Welfare Allowance					P21 and Social Welfare Statement
DSP – Pension Payment Please specify:					P21 and Social Welfare Statement
DSP – Rent Supplement					P21 and Social Welfare Statement
DSP – Illness Benefit					P21 and Social Welfare Statement
DSP – Disability Allowance					P21 and Social Welfare Statement
DSP – Partial Capacity Benefit					P21 and Social Welfare Statement
Other DSP payment Please specify:					P21 and Social Welfare Statement
	<u>M</u>	edical Card/ GP Vi	sit Card		
Do you possess a medical	card/ GP \	/isit Card? Yes		No 🗆	

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ent, loans, child			o include for

PERSONAL STATEMENT

Please attach a typed personal statement with this application form (approx 1 page). It can include any information you believe would assist in your application. Your statement should include some or all of the following:

- 1. A summary of your personal circumstances.
- 2. An overview of your plans for the next stage of your education and training.
- 3. Any obstacles you can anticipate in achieving your goals.
- 4. Your future career aspirations.
- 5. What difference will this access programme make for you?
- 6. Any other information that supports your application.
- 7. Lack of Funding hindrance to Education?

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DECLARATION

I certify that the information supplied is	correct and complete.

Signature of applicant: ______

Date:

Please complete application in full and return to:

Mr Ian Ryan Access Programme Law Society of Ireland Blackhall Place Dublin 7

Tel: 01 6724802

E-mail: access@lawsociety.ie

Applications are considered at two stages in the year. In order to process applications, hold interviews and relay outcomes in time for candidates, you are requested to apply as far as possible in advance of these deadlines. Your co-operation is appreciated.

The 2025 deadline for the next round of application review is as follows (interviews are usually scheduled within two weeks of the deadline):

• 5.00pm on the last Friday in April 2025

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