MUC Logo

**Deontas do Theangacha Réigiúnda agus Mionlaigh:**

**Comhairle Ceantair Lár Uladh**

(Ta an fhoirm seo ar fáil i mBéarla chomh maith)

Fáiltíonn Comhairle Ceantair Lár Uladh roimh iarratais i dteanga réigiúnda nó mionlaigh.

1. **Sonraí Teagmhála Tuismitheora/Caomhnóra** (má bhaineann le hábhair)

Tabhair sonraí teagmhála thuismitheoir/chaomhnóir an iarratasóra le do thoil

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| **Ainm:** | |
| **Seoladh r-phoist:** | **Uimhir gutháin:** |

1. **Sonraí pearsanta**

Tabhair sonraí pearsanta an iarratasóra le do thoil.

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| **Ainm:** | | **Fireann / Baineann** |
| **Seoladh:** | | |
| **Cód Poist:** | **Dáta breithe:** | |
| **Seoladh r-phoist:** | | |

1. **Sonraí Scoile** (má bhaineann le hábhair)

Tabhair sonraí do scoile móide ainm do mhúinteoir ranga chomh maith lena s(h)íniú údarais.

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| **Ainm Scoile:** | | |
| **Seoladh:** | | |
| **Cód Poist:** | **Rang:** | |
| **Ainm do Mhúinteora:** | | |
| **Síniú do Mhúinteora:** | | **Dáta:** |

1. **Sonraí Cúrsa**

Tabhair sonraí an chúrsa a bhfuil tú ag iarraidh Deontas do Theangacha Réigiúnda agus Mionlaigh de chuid Chomhairle Ceantair Lár Uladh dó le do thoil.

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| **Ainm an Chúrsa:** | |
| **Seoladh:** | |
| **Cód Cúrsa (móide dátaí):** | **Costas Iomlán an Chúrsa:** |
| **Sonraí Teagmhála don Chúrsa:** | |

1. **Tairbhe an Chúrsa**

Cur síos ar an dóigh a fheabhsóidh an cúrsa do scileanna teanga le do thoil.

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1. **Critéir**

Deimhnigh le do thoil, trí thic a chur le gach rannóg chuí, go gcomhlíonann tú na critéir faoi choinne Deontas do Theangacha Réigiúnda agus Mionlaigh de chuid

Chomhairle Ceantair Lár Uladh.

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| Tá mé i mo chónaí i limistéar Chomhairle Ceantair Lár Uladh |  |
| Tá mé cláraithe ar chúrsa a fheabhsóidh mo scileanna i dteanga réigiúnda nó mionlaigh. |  |
| Níl scolaireacht agam ó chistí poiblí chun freastal ar an chúrsa (eg Sparántacht LÍOFA An Roinn Pobail ) |  |
| Tá de rún agam an cúrsa a chríochnú trí fhanacht ann an fad ama iomlán agus soláthróidh mé fianaise de mo thinreamh foirfe agus íocaíocht na dtáillí cúrsa |  |

1. **Deimhniú**

Dearbhaím go bhfuil an t-eolas atá tugtha agam fíor agus beacht mar is fearr is eol domh.

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| **Síniú Iarratasóra** | **Dáta** |
| **Síniú Tuismitheora/Caomhnóra** (má bhaineann le hábhair) | **Dáta** |

**Do Chuid Eolais**

Cruinníonn Comhairle Ceantair Lár Uladh eolas pearsanta nuair a lorgaíonn tú seirbhísí uainn. Ní bhainfimid feidhm as an t-eolas seo ach leis na seirbhísí sin a sholáthar.

**Do Dhearbhú**

Tuigim an méid seo a leanann:

Bainfidh tú feidhm as an eolas atá tugtha agam le m’iarratas ar Dheontas Theanga Réigiúnda agus Mionlaigh a phróiseáil.

Tugaim cead an t-eolas a iniúchadh le hoifigigh eile sa Chomhairle, comhairlí agus rannógaí stáit eile, An Roinn Pobail mar shampla.

Tugaim cead fosta eolas fúm a fháil ó eagraíochtaí áirithe eile, agus eolas fúm a thabhairt dóibh le cinntiú go bhfuil an t-eolas beacht agus le airgead poiblí a chosaint. Tá ranna stáit agus rialtas áitiúil san áireamh seo.

Dearbhaím go bhfuil an t-eolas atá tugtha agam anseo beacht agus iomlán.

Síniú an Iarratasóra:

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Dáta:

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**SUPPLIER BACS DETAILS FORM**

**SUPPLIER MUST COMPLETE SECTIONS 1, 2, 3 & 4 AND RETURN AS DIRECTED**

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| **SECTION 1** | | **SUPPLIER CONTACT SECTION** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Supplier Name (in full)** |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Supplier’s legal status**  **(select one or more as appropriate)** | Sole  Trader | | | | | | Partnership | | | | | | | | Limited  Company | | | | | | | Charity | | | | | | | | Other | | | | | | |
| **Contact Name** |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Position Held** |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Supplier Address** |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **Postcode** |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Telephone/Mobile Number** |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Email Address for**  **BACS Remittance** |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **SECTION 2** | **BANK DETAIL SECTION** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Supplier’s Bank/Building Society** |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Branch Name**  **Address**  **Post Code** |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **Account Name** |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Account Number** |  | | | |  | | | |  | | |  | | | |  | | | |  | | | |  | | |  | | | |  | | |  | | |
| **Sort Code** |  | | | |  | | | |  | | |  | | | |  | | | |  | | | |  | | |  | | | |  | | |  | | |
| **IBAN Code** |  | |  |  | |  | |  | |  |  | |  |  | | |  |  |  | |  | |  | |  |  | |  |  | | |  |  | |  |  |
| **SWIFT-BIC Code** |  | | |  | | | |  | | |  | | |  | | | |  | | |  | | | |  | | |  | | | |  | | |  | |
| **SECTION 3** | **VAT, CIS, etc. DETAILS** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Supplier’s VAT Number (if applicable)** |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Supplier’s UTR Number (or other tax reference)** |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Supplier’s N.I. No. or Company Reg. No. (if applicable)** |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **SECTION 4** | **SUPPLIER AUTHORISATION SECTION** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Signature** |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Position held** |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Date** |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

**NEXT SECTION IS FOR OFFICE USE ONLY**

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| **INPUT BY** |  | **DATE** |  |
| **CHECKED BY** |  | **DATE** |  |
| **SUPPLIER REFERENCE ALLOCATED** | | |  |