Application Form for the Reid Entrance Exhibition 2020

Eligibility:

1. Applicants for the Reid Entrance Exhibition should be natives of County Kerry and of limited means.
   - Applicants who were born elsewhere, who subsequently moved to County Kerry, and who have had either their primary education or secondary education in Co. Kerry, may be considered if there are an insufficient number of applicants from Co. Kerry.
   - Limited means: Applicants whose gross family income exceeds €74,760 (or €82,147.50 if there are 4 or more dependent children) are not eligible for this exhibition.

2. Applicants must have accepted a place on the first year of a course at Trinity College Dublin, and may not be graduates of any other university.

3. Applicants must not have completed their nineteenth year before 1 May 2020.

Applying:

1. Applications will be accepted up to 15 October 2020, and must be accompanied by complete financial documentation - in the form of a P60 or Balancing Statement from the Revenue service for the financial year 2019. Statements from accountants are not acceptable.

2. Applications will be processed in late October. However, applicants who are clearly ineligible for this exhibition may be notified at an earlier date.

3. Up to 5 Reid Entrance Exhibitions will be granted, on the basis of applicants’ public examination results.

4. All correspondence from the university in relation to this exhibition will be via e-mail.

Exhibitions:

1. Reid Entrance Exhibitions are tenable for two years. Exhibitioners have their Commons (evening meal) free, are supplied with a laptop and receive a salary of €6,000 per annum (the €6,000 award includes any applicable fee payments).

2. During the Senior Freshman (second) year exhibitioners normally compete for foundation scholarships. Those who fail to obtain such scholarships, but are deemed to have shown sufficient merit (2.1), may have their exhibitions extended for two further years.
Part A (to be completed by the applicant)

Name: .................................................................................................................................

Home Address: ...................................................................................................................
.................................................................................................................................
.................................................................................................................................

CAO No: ............................................................................................................................

TCD Application No: .........................................................................................................
(This number is provided after you accept a place in Trinity. You may apply before this number is available if you wish).

Email Address: ..................................................................................................................
(for all correspondence)

County of Birth: ..................................................................................................................

Date of Birth: .....................................................................................................................

Country of Birth: ..............................................................................................................

Have you lived in Co. Kerry since birth: Yes [ ] No [ ]

Part B (to be completed by the applicant’s parent or guardian)

The College assumes that in most cases parents/guardians accept prime responsibility for university education. **Evidence of gross annual incomes in the form of a P60 or Balancing Statement must be attached** (please note copies only should be attached as these documents will not be returned).

Family income for 2018:

Father € .................................................................................................................................

Mother € ...............................................................................................................................

Other Income € ....................................................................................................................

Family Circumstances

Other children in full time education Number [ ] Ages ..............................................................

Other fully dependent children Number [ ] Ages ........................................................................

Occupation of parent/s or guardian/s

Father’s occupation: ..................................................................................................................

[ ] Full time [ ] Part time

Mother’s occupation: ..............................................................................................................

[ ] Full time [ ] Part time
I certify that the information given in this application is complete and accurate to the best of my knowledge and I understand that any misrepresentation may render my application void.

Name: ___________________________________________ Signature: ___________________________________________

Address: ___________________________________________ Date: ___________________________________________
                                                     ___________________________________________
                                                     ___________________________________________
                                                     ___________________________________________

Tel No: ___________________________________________ Parent [ ] Guardian [ ]

Email address: ___________________________________________

Part C (to be completed by a third party: family solicitor, bank manager, professional social worker, school head or other)

I certify that the information given in this application is complete and accurate to the best of my knowledge.

Name: ___________________________________________ Signature: ___________________________________________

Address: ___________________________________________ Position: ___________________________________________
                                                     ___________________________________________
                                                     ___________________________________________
                                                     ___________________________________________
                                                     Relationship to Family ___________________________________________

Tel No: ___________________________________________ Date ___________________________________________

Please return this completed form together with copies of financial documentation to:

The Applications and Admissions Team, Academic Registry, Watts Building, Trinity College, Dublin 2.