*Síol Schools Trust CLG*

***c/o Le Chéile Education Centre, Bushy Park House, Templeogue Road, Dublin D6W EH51***

***Telephone: 01 5380104 E-mail:*** ***admin@lecheiletrust.ie*** ***Web:*** [***www.lecheiletrust.ie***](http://www.lecheiletrust.ie)

**Le Chéile Trust Building Approval Process**

**Gateway 1**

**Application for Approval to Apply for a Grant from the Department of Education for Building Works**

|  |  |
| --- | --- |
| **School Name** |  |
| **School Roll Number** |  |
| **School Address** |  |
| **Contact Details****(email and mobile phone no.)** |  |
| **Scheme applied for** |  |
| **Please give specific details of the proposed works, and the reasons for their necessity.** |  |
| **Estimated cost if known** | **€** |
| **Proposed source of funding if different or additional to Department of Education grant** |  |

We hereby request approval from Síol Schools Trust to apply for funding for the above outlined building works at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (School)

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Principal)

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Chairperson, Board of Management)

Date:

***Please email completed form to*** ***pat@lecheiletrust.ie***

**For Office Use only:**

**Date Received:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Date reviewed by Property Subcommittee:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Decision: Approval Granted**

 **Additional Information Requested**

 **Approval Declined**

Reason for Refusal:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

On behalf of Síol Schools Trust

**Le Chéile Trus**

**Part 2**