***This form relates to the first payment and confirms that QTS has been***

***successfully gained*** *by undertaking an accredited postgraduate secondary initial teacher*

*education programme. This information is being collected to enable administration and payments of Iaith Athrawon Yfory Incentive grants. This form should be returned to Welsh Government* ***ITEIncentives@gov.wales*** *with a scanned copy of the QTS Certificate.*

**This claim cannot be submitted unless a vendor details form has already been submitted to Welsh Government within the allocated timescales**.

***Please complete the following application form.***

*Prior to completing the claim form applicants and ITE partnerships must read the associated:-*

* *legal Scheme related to the academic year of study,*
* *privacy notice related to academic year of study, and*
* [*Welsh Government information*](https://gov.wales/iaith-athrawon-yfory-incentive-scheme-guidance-students-html) *related to this incentive for relevant academic year of study.*

|  |
| --- |
| Section A: Applicants Personal Details |

|  |  |
| --- | --- |
| Full name of student |  |
| Date of Birth |  |
| Address |  |
| Postcode |  |
| Email address *(personal & as on vendor details form)* |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Student Number |  | Teacher Reference Number  |  |

|  |
| --- |
| Section B: ITE Programme Details  |

|  |  |
| --- | --- |
| Name of ITE Partnership |  |
| Name of ITE Programme *(Including subject)* |  |
| Academic year of study  |  |
| Date stated ITE Programme |  |

|  |
| --- |
| Section C: Qualified Teacher Status |

|  |  |  |  |
| --- | --- | --- | --- |
| Date QTS Achieved |  | QTS Certificate attached  |  |

|  |
| --- |
| Section D: Student Declaration |

I am claiming the first instalment of the Iaith Athrawon Yfory incentive grant - £2500

I authorise the Welsh Government to pay this into the account details provided on the Vendor details form. *It is my responsibility to notify Welsh Government of any changes.*

I confirm that:-

*(Please tick)*

|  |  |  |
| --- | --- | --- |
| 1. | I have read the Privacy Notice supplied by the Welsh Government | 󠆴 |
| 2. | I have read the information related to the Iaith Athrawon Yfory incentive provided by the Welsh Government  | 󠆴 |
| 3. | I have read the Legal Scheme relevant to the academic year of study supplied by the Welsh Government  | 󠆴 |
| 4. | The details provided in sections A, B and C are factual and correct  | 󠆴 |
| 5. | I trained in an eligible postgraduate secondary programme during the \_\_\_\_\_\_\_\_\_\_\_\_ academic year  | 󠆴 |
| 6. | I am now able to teach through the medium of Welsh or Welsh as a subject and have successfully obtained QTS | 󠆴 |
| 7. | I am submitting this claim within 1 year of obtaining QTS  | 󠆴 |
| 8.  | I have provided a copy of my QTS certificate | 󠆴 |

|  |  |  |  |
| --- | --- | --- | --- |
| Signature *(by student named in section A)* |  | Date  |  |

**Note: a false declaration my result in any grant paid being reclaimed**

*Please note that the Welsh Government will hold a record of your personal data (as supplied in section A, B, C,D and E of this application) to enable reconciliation and processing of Iaith Athrawon Yfory Incentive grant payments. We will not share them with any other stakeholders. Please read the associated Privacy Notice and* [*Data Protection & Freedom of Information*](https://gov.wales/iaith-athrawon-yfory-incentive-scheme-guidance-students-html#section-59162) *provided by Welsh Government. As you are in receipt of grant funding from the Welsh Government we need to make you aware that we may share any data you provide to us with fraud prevention agencies and third parties for the purposes of preventing and detecting fraud. If fraud is detected, you could be refused certain services, finance or employment in future. Further details of how your information will be used by us and these fraud prevention agencies, and your data protection rights, can be found on* [*https://gov.wales/privacy-notice-welsh-government-grants*](https://gov.wales/privacy-notice-welsh-government-grants) *or by contacting* ITEIncentives@gov.wales***.***

|  |
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| Section E: Payment Details |

The claim payment will be paid directly into the account that you provided on your vendor details form. If this account has changed please contact Welsh Government at ITEIncentives@gov.wales to amend your details.

|  |
| --- |
| Section F: Initial Teacher Education Provider Declaration |

The purpose of this section is to confirm that the applicant (section A) has successfully gained QTS. This confirmation should be signed by an authorised signatory only.Prior to completing the claim form you must follow the guidance at the start of this claim form.

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|  |  |
| --- | --- |
| Name *(in block capitals)* |  |
| Job Title/Position  |  |
| Name of ITE partnership  |  |

I am an authorised signatory for my ITE Partnership.

I confirm that the applicant (section A) has undertaken the ITE programme stated (section B) during the \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ academic year and has successfully obtained QTS to enable them to teach through the medium of Welsh or teach Welsh as a subject.

|  |  |  |  |
| --- | --- | --- | --- |
| Signature  |  | Date  |  |

**Note: A false declaration may result in any grant paid being reclaimed**