



Date Issued:

Date Received:

Student Welfare Service

Application for support from the Higher Education Access to Learning Fund and other hardship funds for full-time home (UK) students

Your Name:

Student No:
(see library card)

Academic Year:
e.g. 2010/11

How did you hear about this fund?

Important:

- Read the accompanying guidance notes before completing this form.
- Your application will only be considered if you answer all the appropriate sections and attach copies of all relevant documents (see guidance notes). **If you experience difficulty in completing the form or are unable to provide the supporting documents required please make an appointment to see the Student Finance Adviser.**
- Answer all the questions, by **printing clearly** and by **ticking** the appropriate boxes.
- Carefully read the Data Protection statement below.
- Return your completed form to the Student Welfare Service, Percy Gee Building, University of Leicester, University Road, Leicester, LE1 7RH.

Confidentiality.

Applications are seen only by the Hardship Funds Committee and Student Welfare Service staff. It may be necessary for additional supporting information to be sought from other University staff in order for the Committee to reach a decision, in which case we will seek your permission beforehand.

Statement on Data Protection.

The information you provide will be used only for the purposes of the administration of the above funds. It will be used by persons connected with the operation of these funds (e.g. administrators and trustees/committee members). The University's auditors sometimes ask to see information pertaining to individuals in order that they can monitor the University's spending of public money and your information may be disclosed in such circumstances.

The information will be treated with sensitivity and in confidence at all times. It will normally be held for seven years and will then be destroyed. If you wish to see information that is held about you please contact the Student Welfare Service in the first instance; we may refer you to the University's Data Protection Officer if we are unable to deal with your enquiry.

Part 1: Your personal details

1. Is this your first contact with the Student Welfare Service? Yes No
2. Your title (*tick one box only*) Mr Mrs Miss Ms Other (*specify*)
3. Your first names (*in full*)
4. Your surname (*in full*)
5. Your date of birth (*DD/MM/YYYY*)
- 5a. Your age in years
6. Your full **correspondence** address
(*Please ensure you notify Registry of any change to your correspondence address*)

Post code
7. Your full **home** address
(*if different from above*)

Post code
8. Telephone numbers:
Term Time: Home: Mobile:
9. E-mail address
10. Personal status / Accommodation details
Do you live:
 alone? with your partner or spouse? in shared accommodation?
 with your parents/guardian? in University accommodation? in lodgings?
Other (please specify)

Part 2: Your course details

11. Course title
e.g. BA English
12. Faculty / Dept
e.g. Arts
13. Undergraduate Postgraduate Writing up
14. Tutor's Name
- Do we have your permission, if necessary to contact your personal tutor? Yes No

15. Location of studies
e.g. Main Campus / School of Education etc.
16. Course dates: Start (month/year) End (year)
17. Year of current course (Please tick) Foundation 1 2 3 4 5 6
18. Is this a repeat year? Yes No
19. Is this your final year? Yes No
20. How many weeks of study does your course entail this academic year?
21. **Fieldwork/Study Abroad:** Please give start and finish dates (including travel days) and location of any COMPULSORY fieldwork/study abroad, plus supervisor's name who we will contact to confirm arrangements
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- Fieldwork Supervisor: Total Estimated Cost: £

Part 2A: Previous Study

22. Have you ever studied a course of higher education in the UK (e.g. degree or HND) before starting your current course? Yes No

If yes, please give the following details:

Institution (name of College/University)

Course title

Start date End date

Did you complete the course? Yes No

If yes, what qualification did you attain?

N.B. If you have studied in higher education more than once before please give details of all other courses at this level in section 7.

Part 3: Your dependants

23. Do you have any children who are financially dependent on you? Yes No

Give details of children's full name(s)

Date(s) of birth

Child 1	<input type="text"/>	<input type="text"/>
Child 2	<input type="text"/>	<input type="text"/>
Child 3	<input type="text"/>	<input type="text"/>

If you are requesting assistance with costs, your child/ren should normally be cared for by a registered childminder / nursery

Carer Details

Name and address of Nursery / Childminder

<input type="text"/>	Telephone No: <input type="text"/>
<input type="text"/>	Ofsted No: <input type="text"/>

Care Provided

How many hours / days is childcare required?

Term Time Arrangements

Vacation Arrangements

	Days	Hours	Cost per day	Days	Hours	Cost per day
Child 1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Child 2	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Child 3	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Please continue in Part 7 if necessary and tick this box to indicate you have done so.

Part 4: Disability/Special medical needs

24. Do you have a disability, specific learning difficulty or chronic medical condition? Yes No

25. Have you applied for Disabled Students' Allowance (DSA)? Yes No

26. Do you wish to apply for any financial assistance towards any special equipment/material not covered by DSA or for assistance towards the cost of a diagnostic test? (e.g. dyslexic students)

Yes No

If yes, please provide details: (continue in Part 7 if necessary)

<input type="text"/>

Part 5A: Student's Income

Please indicate who is financially assessed for your student loans, grants etc.

Self

Parent/Guardian

Partner

Non income accessed

Annual Amount

Student Loan

Maintenance/Special Support Grant

Parental/partner contribution

Net earnings from your paid work

Working/Child Tax Credits

Bursary (e.g. NHS, TTA, GSCC)

HE Grant/Welsh Assembly Grant/Northern Ireland Bursary/Young Persons Bursary from Scotland

Parents' Learning Allowance

Adult Dependents' Grant

Childcare Grant

University Bursary

University Scholarship

Professional / Career Development Loan

Weekly Amount

Income Support / JSA

Housing / Council Tax Benefit

Child Benefit

Disability benefits (please specify)

Other income including savings (please specify)

Part 5B: Partner's Income

Net annual income

(Take home pay after deduction of NI and TAX)

Part 6: Expenditure

Monthly Amount

Rent

Mortgage

Board

Council Tax

General living costs (includes utilities, TV licence, insurances and groceries)
Office use only

Building insurance (home owners only)

Credit card payments (please provide statements)

Other debts (please give details in Section 7 – please provide evidence)

Weekly Amount

Children's school meals

Travel – term time to course

Partner's essential travel (e.g. to place of work)

Travel – home visits

Do you run a car? Yes / No

(Please specify in Section 7 your reasons for running a car)

Does your partner run a car? Yes / No

Other – any additional costs not included please detail in section 7 overleaf.

Tuition Fees

(Please tick as appropriate)

Annual Amount

Paid by grant £

Paid by loan £

Paid by parents £

Paid by student £

Part 7: Supporting statement

27. Please explain your financial situation, giving any information in support of your application for funding that you consider to be relevant. Please give additional details where prompted throughout the various sections of the form.

N.B. Please tell us of any anticipated changes to your household income or expenditure in the next 12 months (e.g. new job, moving home, having a baby, change in partner's income: to/from work/benefits/full-time education etc.). You may be asked to provide further information about this.

Part 8: Declarations

How long had you lived in the UK on the first day of the first academic year of your course (N.B. the first day of the academic year is always 1st September for courses starting between September to December):

3 years or more less than 3 years

Are you a non-UK European Union National? Yes No

Have you ever had any restrictions on your length of stay in the UK? Yes No

If yes, please provide documentary evidence that this no longer applies.

- I declare that the information that I have given on this form is correct and complete to the best of my knowledge.
- I understand that giving false information will automatically disqualify any application for Hardship Funds and may also lead to disciplinary procedures being brought against me by the University. I further undertake to repay any grants obtained by me as a result.

Your name (CAPITALS)

Your signature

Date

Please provide **COPIES** of all documents listed below which are appropriate to your circumstances.

- Student Finance England / LA / SAAS / ELB Support Notification form
- Student Loan/Grants Payment Schedule letter
- NHS / TDA or other Bursary Notification letter
- Research Council / Board Award Notification letter
- Receipts from nursery/childminder
- Proof of any benefits/tax credits of which you are in receipt (either full award letter or first three pages of payment book)
- Bank / Building Society statements – copies of the most recent three months, **clearly annotated**, to show as far as possible, where your money has been spent and where credits are from. If you do not have the relevant statements, most banks will be able to provide you with a printout (do not ask for copy statements as these normally incur a charge.) Ask your bank to put your name and their branch stamp on the printout.

If you are eligible for a Student Maintenance Loan then we need to see evidence of this payment being received into your bank account before any award, if appropriate can be paid.

- Evidence of rent/mortgage (unless payment of this is very clear from your bank statements)
- Other documents in support of your circumstance (e.g. medical certificates, evidence of high travel costs, proof of refugee status, Exceptional Leave to Remain / Enter etc.)

FOR OFFICE USE ONLY

SIO Number

Code

Category for HEFCE returns

General Hardship

Childcare

Transitional Part-time Fee Waiver

Travel / Transport

Part-time Taster Module/AFSS

Special Needs / Disability

Compulsory Fieldwork/
Study Abroad/ Bursary

Amount

£

ALF Category

Standard

Non-Standard

Non-Cont

Trans

Fee waiver

P/T Childcare

P/T Taster

AFSS

CONTACT DETAILS**Access to Learning Fund Administrator**

Christine Dovey

Telephone Number: 0116 223 1185

Email: cd48@le.ac.uk

Senior Welfare Officer

Julie Boggon

Telephone Number: 0116 223 1185

Email: jb40@le.ac.uk

Student Finance Advisor

Adrian Gascoigne

Telephone Number: 0116 223 1185

Email: asg19@le.ac.uk

Student Finance Advisor

James Pooley

Telephone Number: 0116 223 1185

Email: jp263@le.ac.uk



Student Welfare Service

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www.le.ac.uk/welfare