

**SECTION 11: Declaration**

By signing below, you agree to the following declarations:

- I understand that funding is limited and not guaranteed.
- I declare that full disclosure of all relevant information has been given in support of this application and to the best of my knowledge and belief it is accurate. I understand that the College has a duty to report fraud to the Education Funding Agency.
- Where there is any change in my address/bank details/mobile number, I will notify Student Finance immediately.
- I will inform you immediately of any change in circumstances at any time, which might affect my entitlement to support (in particular if I leave College or am no longer eligible for the funding). I understand that the College will seek to recover the value of support where eligibility is no longer valid.
- I understand that all payments are subject to satisfactory attendance (95% for 16-18 and 85% for 19+) and acceptable behaviour.
- I understand that any funding is for the current academic year only and is not guaranteed for future years.
- I understand that any support received for travel and meals is intended for use by myself only and must not be passed on to other students.

Student Signature: \_\_\_\_\_

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

**Data Protection Act 1998**

I understand that our signatures on this form gives HCUK Group the right under the Data Protection Act 1998 to process the information provided, including data of a sensitive nature, for standard College business processes that have been notified to the Office of the Information Commissioner. I accept that this information will be stored securely in both hard and electronic forms within the College's various departments and will be retained during and following my studies for administering my progress and for the provision of statistical returns.

**Contact Details:**

Please contact our Student Finance team for guidance and advice on completing this form.

By telephone on 01482 598942 or by email at [studentfinance@hull-college.ac.uk](mailto:studentfinance@hull-college.ac.uk)

**For office use only**

Age group		Eligible	<input type="checkbox"/> Yes	<input type="checkbox"/> No	FT/PT	<input type="checkbox"/> FT	<input type="checkbox"/> PT	Guaranteed bursary	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Evidence	<input type="checkbox"/> Yes	<input type="checkbox"/> No	MTB	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Household Income	£			
Course cost	<input type="checkbox"/> High	<input type="checkbox"/> Stand	Course			Free Meals	<input type="checkbox"/> Yes	<input type="checkbox"/> No		
Transport	<input type="checkbox"/> Con	<input type="checkbox"/> Free	<input type="checkbox"/> None	<input type="checkbox"/> Bus	<input type="checkbox"/> Rail	<input type="checkbox"/> Reimb	<input type="checkbox"/> Meg	<input type="checkbox"/> Hull+	<input type="checkbox"/> NWW	
Free Transport Amount	£	Kit Transfer	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Transfer Amount	£	Total Deductions	£	Miles from College	
Total Award	£	Award after Deductions	£	<input type="checkbox"/> Weekly	£	<input type="checkbox"/> Fortnightly	£	<input type="checkbox"/> Half-Termly	£	
Assessed by:		Date:		Input by		Date:				
Additional Comments:										



# Hull & Goole College

# Financial Support Application Form

## 2017-2018

<b>Please complete in block capitals and complete all sections marked * (mandatory fields)</b>			
<b>SECTION 1: Student's Details</b>			
Student Number:			
*Surname:		*First Name (s):	
*D.O.B:		*Age on 31/08/17	
*Address:			
*Post Code:		Telephone No:	
*Mobile No:			
*Email Address:			
<b>SECTION 2: Student Status - please tick all relevant boxes</b>			
<input type="checkbox"/> I live with parent(s) /carer (s) who have responsibility for me	<input type="checkbox"/> I live independently	<input type="checkbox"/> I live with a partner	
<input type="checkbox"/> I live in supported accommodation	<input type="checkbox"/> I am looked after by a Local Authority or I am a Care Leaver (please provide proof)	<input type="checkbox"/> I am a parent (please see Section 8)	
<input type="checkbox"/> I consider myself to have a severe disability and receive both ESA and DLA (please provide proof)			
<b>SECTION 3: Residency Details</b>			
*Have you been resident in England, Scotland, Wales or Northern Ireland in the last 3 years?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
*If 'No', have you been resident in the EU for the last 3 years?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
*Are you an Asylum Seeker?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
<b>SECTION 4: Course Details</b>			
*Name of course for which you have an offer.			
*Are you studying a full time or part time course?			
Are you applying for an Advanced Learner Loan for your course (19+ only)	<input type="checkbox"/> Yes	<input type="checkbox"/> No	If no how are you funding your course?
<b>SECTION 5: Evidence of Household Income—please tick all that you receive</b>			
Please provide <b>full copies</b> of evidence for you or anyone you live with dated within the last 3 months.			
<input type="checkbox"/> Income Support/Universal Credit	<input type="checkbox"/> Child Tax Credit/ Working Tax Credit (2017/2018—TC602-all pages)	<input type="checkbox"/> Employment Support Allowance (ESA)	
<input type="checkbox"/> Job Seekers Allowance (JSA)	<input type="checkbox"/> Pension Guarantee Credit	<input type="checkbox"/> Personal Independence Payment (PIP)	
<input type="checkbox"/> Carers Allowance	<input type="checkbox"/> Pension	<input type="checkbox"/> Wage slips or P60 for the last tax year	
<b>SECTION 6: Free College Meals (16-18 students only)</b>			
We operate the Governments 'Free meals in Further Education' initiative and students applying for the bursary will automatically be assessed for support.			

<b>SECTION 7: Transport—please tick relevant boxes.</b>			
<b>To be eligible for support with transport you must be studying a full time programme and live more than 2miles away from the college site.</b>			
*Which site will you be studying at? (please give details below)			
*How do you travel to college?	<input type="checkbox"/> Bus	<input type="checkbox"/> Train	<input type="checkbox"/> Other (please give details below)
*Which bus company will you use?	<input type="checkbox"/> Stagecoach Hull	<input type="checkbox"/> EYMS	
If travelling by bus (and your application is successful) would you like to use your bursary to pay for your weekly travel?			<input type="checkbox"/> Yes <input type="checkbox"/> No
If you travel by train-which station will you use most frequently?			
<b>Section 8: Transfers for equipment (hairdressing/beauty courses only)</b>			
Would you like the money transferring for your Hairdressing/beauty kit?			<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>SECTION 9: Childcare</b>			
Do you need help with your childcare costs?			<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes please give details below for each child that requires childcare funding.			
If you are aged between 16-19 please contact Care to Learn at <a href="http://www.Gov.uk/care-to-learn">www. Gov.uk/care-to-learn</a> or our Student Finance team on 01482 598942 or email <a href="mailto:studentfinance@hull-college.ac.uk">studentfinance@hull-college.ac.uk</a> .			
Name of child	Date of birth	Age	
Have you registered with a HCUK College Childcare Centre?			<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>SECTION 10: Bank Details for Bursary Payments</b>			
Account Holder's Name:			
Bank Name:			
Sort Code (6 numbers):			
Account Number (8 numbers):			
If you do not have a bank account in your own name and would like the bursary paying into someone else's account please fill in the bank details above and sign the declaration below. I would like my bursary payments paying into the account above:			
Student signature:			Date: