

**Weymouth College Discretionary Support Fund 2018/19**

**Please complete all relevant sections of the form to avoid delays and return your completed application with the evidence required to Student Finance, Student Services, Weymouth College, Cranford Avenue, Weymouth, DT4 7LQ. Tel: 01305 764807**

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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Personal Details** | | | | | | | | |
| **Full Name** | |  | | **Student ID Number** | | |  | |
| **Date of Birth** | |  | | **Age on 31 Aug 18** | | |  | |
| **Contact Details** | | | | | | | | |
| **Address** | |  | | | | **Postcode** | |  |
| **Mobile No** | |  |
| **Email** | |  | | | | **Home No** | |  |
| **Household details & residential status** | | | | | | | | | |
| **Who do you live with? (Please tick)** | | |  | | | | | | |
|  | Parents | |  | | Alone | | | | |
|  | Legal Guardians | |  | | Spouse / Partner | | | | |
|  | Other please specify | | | | | | | | |
| **Residential status (Please tick)** | | | | | | | | | |
|  | I am a British Citizen **(I was born in the UK and have been living in the UK for 3 or more years)** | | | | | | | | |
|  | I was born outside the UK **(please provide your passport or Home Office documents)** | | | | | | | | |

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| **Course details for academic year 2018/19** | | | | | | | | | | | |
| **Name of your course** | |  | | | | | | | | | |
| Have you taken out 19+ Adult Learner Loan? Y/N | | | | | | | | | |  | |
| **Days in college** | Monday | |  | Tuesday |  | Wednesday |  | Thursday |  | Friday |  |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Course Expenses (books, equipment, trips, overalls, other resources) Please see guidance booklet.** | | | | | | | |
| Free Meals (if eligible) only whilst timetabled at college | | | Number of days | |  |  | |
| Travel Costs -(how do you travel- bus, other)  ***Petrol costs, cannot be claimed, unless in extenuating circumstances***. | | | £ per day | | | Receipt Yes/No | |
| Books & equipment, uniform, steel toe caps | | | £ | | | Receipt Yes/No | |
| Trips/Educational visits | | | £ | | | Receipt Yes/No | |
| DBS, other, please specify | | | £ | | | Receipt Yes/No | |
| **Total** | | | £ | | | | |
| **Household income (Please tick or circle )**  **Please also provide information and evidence on all household income including spouse/partner and any benefits you are in receipt of. Applications will NOT be processed without income evidence.** | | | | | | | |
|  | Working and or Tax Credit & Child Tax credit Full award Notice and **(all pages) TC602 or TC603** | | | | | | |
|  | Income from employment/ self-employment – Previous years tax (gross) Annual Tax Summary or **SA302** | | | | | | |
|  | Proof of JSA- Most recent letter issued within the last 3 months for benefits received. | | | | | | |
|  | Proof of ESA - Most recent letter issued within the last 3 months for benefits received. | | | | | | |
|  | Proof of Universal Credit- -PIP, Most recent letter issued within the last **3** months for benefits received. | | | | | | |
|  | Other please specify.................................................................................and provide evidence. | | | | | | |
| **Your Bank Account Details - For refunds if eligible** | | | | | | | |
| Bank Name | |  | | Name of Account Holder | | |  |
| Sort Code | |  | | Account No | | |  |

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| **Childcare Expenses- Age 20+ Only** | | | | | | | | | | | | | |
| **Name of Child** | | | | **Date of Birth** | | | | **Cost per child-per week** | | | | | |
|  | | | |  | | | | £ | | | | | |
|  | | | |  | | | | £ | | | | | |
|  | | | |  | | | | £ | | | | | |
| **Childcare Provider Name** | | | |  | | | | **OFSTED registration No** | | | |  | |
| **Contact Name** | | **Address** | | | **Town** | | | | **Post Code** | | | **Contact NO** | |
|  | |  | | |  | | | |  | | |  | |
|  | |  | | |  | | | |  | | |  | |
| **Bank Name** | | **Bank address** | | | **Sort Code** | | | | **Account No** | | | **Total Weekly Cost** | |
|  | |  | | |  | | | |  | | | £ | |
| **Sessions – Please tick** | | | | | | | | | | | | | |
| **Monday** | | **Tuesday** | | | **Wednesday** | | | | **Thursday** | | | **Friday** | |
| am | pm | am | pm | | am | pm | | | am | pm | | am | pm |
|  | | | | | | | | | | | | | |
| **Terms and Conditions** | | | | | | | | | | | | | |
| **Allocation of funds will be subject to the availability of funds**   * Funding is **limited** and offered on a first come first served basis. Except the Guaranteed Bursary **(GB**) * Funds are administered by the college at its discretion to assist students experiencing financial hardship and it is to help towards course associated-costs. **Funds are not an entitlement**. * Students should be aware that any payments from the Discretionary Support Fund may affect their entitlement to other benefits. (E.g. JSA,ESA, universal credit) It is your responsibility to declare any funds received from discretionary support. * Each application to the discretionary support fund will be individually assessed. * All awarded funds including the ***GB*** are subject to yourbehaviour, conduct and a minimum attendance of **90%** * Financial support will be reduced, suspended, or stopped for bad conduct or behaviour. If a student withdraws from a course, the college reserves the right to request all monies paid and any equipment purchased by the college to be returned. * Students are required to inform us of any change in circumstances as they may affect eligibility. * Any item funded by the college – remains college property, unless otherwise stated.   **Please note: If you should lose your bus pass you will be expected to pay for a replacement**   * **( Please see guidance booklet) No refunds are given if you fail to renew your bus pass in good time.**   **Additional terms and conditions where applicable (Childcare)**   * All Childcare providers must be **OFSTED** registered. * All eligible students will be expected to contribute to the cost of their childcare provision. * All payments will be made directly to the childcare provider by BACS each month on receipt of an invoice * **Retainer and holiday cover costs may not be claimed for**. * Extra meals not already included in the daily price, are not covered and must be paid in full by you to the provider. * You must use any free early learning childcare funding entitlement first. * For consistent absences childcare funding will be withdrawn and you will be liable for any outstanding fees. * You are responsible for your childcare funding until your application has been assessed; this may take up to 4 weeks, any relevant refunds will be made accordingly if your application is approved. * Please advise your provider you have applied for funding from the College. * **If you are required to give 1 month’s written notice prior to leaving/finishing your course please adhere to this as the contract is between you and the Childcare Provider not the College.** | | | | | | | | | | | | | |
| **Declaration** | | | | | | | | | | | | | |
| * I hereby declare that to the best of my knowledge the information given in this form is true and accurate. * I understand that any false or inaccurate information could result in refusal or withdrawal of my fund payments and that this includes any childcare payments, should this be applicable to me. * I have read and understood the terms and conditions above and read the guidance notes and I confirm that I agree to them. | | | | | | | | | | | | | |
| **Student Signature** | |  | | | | | **Date** | | | |  | | |