



Application for Further Education Bursary/
Education Maintenance Allowance
Session 2011-2012

Section 1 - PERSONAL DETAILS

Please use BLOCK CAPITALS

A Surname

B Other Names

C Title

D Date of Birth

E Current Home Address

F Postcode

G Telephone Number

H Mobile Number

I Email

J Term Time Address
(if different from above)

K National Insurance Number

L Scottish Candidate Number

M Immediately before beginning of the course were you:

A Student Unemployed* Employed

A School Leaver Skillseeker Other Benefits

* Students should have DSS Certificate at back of form completed detailing benefit cease date.
If you believe you are entitled to remain on benefits please seek confirmation from your Benefits Advisor.

Section 2 - COURSE DETAILS

Please use BLOCK CAPITALS

A Title of Course
(please write this exactly as it appears in the College prospectus)

B How long does your course last? year(s)

C If more than 1 year for which year are you applying? 1st 2nd 3rd (please circle)

D On what date will you/did you start the course?

E Is this the first time you have applied for a bursary or a grant? Yes No

*If no complete Section 5 with details of all funding you have received within the last 6 years.
Additional details should be given at Section 14. Request previous funding/higher qualification leaflet*

F Have you applied to any other college for a bursary this session?
(Give details below)

G Have you studied this course at Stow previously? Yes No (please circle)
If Yes, provide details at Section 14. Request previous funding/higher qualification leaflet

For Office Use

SEAP Ref.

SFS Ref.

Category: U18 PS SS

Rate: S H Nil

Male / Female

EMA eligible
Yes No
If no, please supply details
.....

Books and Travel only

y n

Appeal
Letter received
Date
Letter requested
Date

Section 5 - DETAILS OF PREVIOUS FINANCIAL SUPPORT FOR EDUCATION

A Have you previously had any financial support for full-time education (*please tick*) Yes No

If you have received funding within the past 6 years you may not be eligible for further support

If no go to section 6

If yes, please indicate the type of support you received, the awarding body and enter the NUMBER OF YEARS for which you received support.

B Have you gained a qualification higher than that for which you are currently applying (*please tick*) Yes No

If yes, please submit full details at Section 14 or appeal letter

Awarding body

Further education bursary awarding body/EMA Name of College Name of Course Did you complete the course? Y/N	From: To:
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Student Awards Agency for Scotland/Education Authority Award Name of University/College Name of Course Did you complete the course? Y/N	From: To:
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Grant from any other body. If so, please give details: Name of Institution Name of Course Did you complete the course? Y/N	From: To:
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If you have provided details above it will be necessary to request additional information from you. It is therefore important that you use section 14 or submit a letter detailing any circumstance you wish the college to consider. Please request previous funding/higher qualification leaflet if you think this will apply to you.

GO TO SECTION 6

Section 6 - DETAILS OF YOUR EDUCATION

Please use BLOCK CAPITALS

Secondary school	Period of attendance		Did you receive EMA Yes/No
	From	To	

College/University attended	Period of attendance		Subjects/Qualifications Achieved	Funding Received EMA/Bursary/SAAS
	From	To		

Please request previous funding/higher qualification leaflet if you hold a higher level qualification than one you are applying to study this year.

GO TO SECTION 7

Section 7 - EMPLOYMENT HISTORY

Please use BLOCK CAPITALS

Previous occupations since leaving school or college. Please cover at least 3 years before the start date of your proposed course.
(Attach separate sheet if necessary). None - please tick and go to section 8.

Employer	Job Title	Place of Work	Type of Work		Start Date	Date of Leaving
			FT	PT		

*Are you under 25 when your course starts? Yes No

If no, go to section 8.

If yes, and you wish to be considered for **SELF SUPPORTING STATUS** you must provide three years evidence of income, e.g. P60s. If you cannot provide this evidence and are under 25 you must submit full parental income details

GO TO SECTION 8

Section 8 - DETAILS OF YOUR FAMILY

Please use BLOCK CAPITALS

To assess how much you are entitled to, we need the following information about you and your family.

A Student's marital status? (Please tick) Single Married Divorced Separated Living with Partner

If single, go to section 9. For all others, appropriate proof must be supplied. See checklist at Section 16

B If married/Living with partner, tell us the name of your partner/spouse

C If your partner/spouse is in employment please tell us his or her occupation

D If he or she has applied for full time education, please provide details

Name of college/school/educational establishment to be attended

If he or she has applied for a grant or bursary, please give details of the institution/education authority or body making the award

What is the amount of the award (if known)?

Please submit copy of award letter received

 £

E If you are married, please provide your original marriage certificate. If you are living with your Partner in an established relationship, submit joint tenancy/mortgage agreement

F If you are divorced or separated, please provide evidence

Divorce Decree (including details of any maintenance payments if applicable) or

Proof of separation (ie lawyer's letter) or Proof of lone parent status or single Occupancy Council Tax notice

ORIGINAL DOCUMENTS ONLY – UNFORTUNATELY WE CANNOT ACCEPT PHOTOCOPIES

GO TO SECTION 9

Section 9 - DETAILS OF YOUR CHILDREN

Please use BLOCK CAPITALS

To assess how much you are entitled to, we also need details of children who are dependent on you or your spouse and any grants or bursaries which they may be receiving. None – please tick and go to section 10.

Name of Child	Relationship to student	Date of Birth*	College/school which he/she is currently attending	Amount of grant/bursary awarded or applied for

*Please enclose ORIGINAL BIRTH CERTIFICATES

Unfortunately we are NOT able to accept medical cards, baptism certificates or photocopies of birth certificates.

Where your child is in receipt of a bursary or award from an Education Authority or College or grant award from SAAS please supply their award letter.

GO TO SECTION 10

Section 10 - DETAILS OF YOUR FAMILY CIRCUMSTANCES

Please use BLOCK CAPITALS. Note: This section MUST be completed by ALL students.

A Will you be 25 years of age or over on the official start date of the course? *(Please tick)* Yes No

If yes, go directly to section 11.

B Is your father alive? *Please answer YES or NO*

C Is your mother alive? *Please answer YES or NO*

Father/Step-Father/Parent's partner/Foster parent/Legal Guardian
(Please delete as appropriate)

Mother/Step-Mother/Parent's partner/Foster parent/Legal Guardian
(Please delete as appropriate)

Name

Name

Home Address

Post Code

Home Address

Post Code

If the person above is not your father, please specify relationship to you

If the person above is not your mother, please specify relationship to you

Marital Status

Single / Married / Divorced / Remarried
Living with Partner / Widowed / Separated

Marital Status

Single/Married/Divorced/Remarried
Living with Partner/Widowed/Separated

Evidence of divorce or estrangement must be provided

Evidence of divorce or estrangement must be provided

Occupation

Occupation

GO TO SECTION 11

Section 11 - DETAILS OF INCOME

Please enter total gross income from all sources for the year ended 4th April 2011. It is important that, under any heading where there is no income, the word NIL is written. Incomplete forms may result in applications being delayed. If either of your parents/spouse is self-employed please ensure that the Accountant's Certificate at the back of the booklet is stamped and signed as required.

PARENT(S)/GUARDIAN/SPOUSE/PARTNER'S INCOME DETAILS	Column 1 Father's Income	Column 2 Mother's Income	Column 3 Partner's Income
A Earning from employment <i>submit P60 2011</i>	£	£	£
B Income from Self-employment <i>submit Self Assessment Tax Calculation 2010/11 SA302 or accountants certificate at back of application</i>	£	£	£
C Tax Credit Award Notice <i>submit letter(s) of award covering most recent tax year</i>	£	£	£
D DSS Benefit Income <i>submit completed certificate at back of application or P60U 2010/11</i>	£	£	£
E Maintenance Payments <i>submit CSA letter or court order or divorce agreement</i>	£	£	£
F Pensions <i>submit P60 2011</i>	£	£	£
G Bank/Building Society Interest <i>submit evidence</i>	£	£	£
H Foreign Income <i>Submit converted sterling evidence</i>	£	£	£
I Other Taxable Income <i>eg from property, benefits in kind/gifts, submit P11D</i>	£	£	£

STUDENT'S INCOME

You must declare all sources of income available to you whilst in attendance at college. Complete all sections below.
IF NONE PLEASE ENTER NIL.

A Working Tax Credit	B Maintenance Payments	C Income from Benefits	D Bank/Building Society Interest	E Pensions	F Other
<i>submit current letter of award</i>	<i>submit CSA letter or court order</i>	<i>complete certificate</i>	<i>submit evidence</i>	<i>submit P60</i>	<i>submit evidence</i>
£ per week/month*	£ per week/month*	£ per week/month*	£ per week/month*	£ per week/month*	£ per week/month*

Parents/Spouses should note that the income calculation used to determine the level of award will be shown on the Schedule of Calculation issued directly to students.

GO TO SECTION 12

Section 12 - DETAILS OF OTHER CHILDREN DEPENDANT ON YOUR PARENT(S) LEGAL GUARDIANS(S)

Please use BLOCK CAPITALS None – please tick and go to section 13.

To assess how much you are entitled to, we also need details of dependent children who are living with your parent(s)/legal guardian(s) and of any grants or bursaries which they may be receiving.

Name of Child	Date of Birth*	College/school which he/she is currently attending	Amount of grant/bursary awarded or applied for

* Please enclose ORIGINAL birth certificates.

Unfortunately we are NOT able to accept medical cards, baptism certificates or photocopies of birth certificates.

GO TO SECTION 13

Section 15 - DECLARATION

I declare that all answers given on this form are true and correct. I am familiar with the contents of the Bursary/EMA Handbook

I understand that if I give false information or withhold relevant information my bursary application will be cancelled and, if necessary, action will be taken against me to recover any money paid to me by the college, and that I will be withdrawn from my course of study.

I understand that I will undertake to refund on demand any overpayment made. This includes overpayments due to miscalculation, re-evaluation of eligibility, unsatisfactory attendance or failure to comply with the College's code of conduct. I acknowledge that repayment methods may include reduction or suspension of future payments.

I undertake to inform the college of any changes in my financial circumstances which may affect my bursary award.

Signature of applicant

Date

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The signature of the parent/legal guardian is also required if the applicant is under 25 years of age and is not considered to be independent by the start date of the course to which this bursary/EMA application applies.

Signature of parent/legal guardian

I declare that all answers given in this form are true. I understand that if I give false information this application will be cancelled and, if necessary, action will be taken to recover any money paid by the college.

Please return your completed application form to the College Bursary Office in envelope provided.

Remember to read the Checklist at Section 16 to ensure you have submitted all relevant original documents.

If the above declaration is not signed the full application will be returned.

- All information will be treated confidentially.
- The college is registered under the 1998 Data Protection Act, under 'the Act' the information in this form will be stored on a computer system by the college.
- The college is under a duty to protect the public funds it administers and to this end may use the information provided on this form for the prevention and detection of fraud. It may also share this information with Scottish Funding Council, other colleges and other bodies administering public funds solely for these purposes.

CLOSING DATE for Bursary/EMA Applications is no later than 6 weeks after your course start date.

For Courses commencing August 2011 this will be **30 September 2011**.

For Courses commencing January 2012 this will be **2 March 2012** (subject to actual start date of course).

Section 16 - CHECKLIST OF DOCUMENTS TO BE SUBMITTED
IN SUPPORT OF BURSARY APPLICATION

CHECKLIST – PLEASE TICK RELEVANT DOCUMENTS TO BE ENCLOSED WITH YOUR APPLICATION

UNFORTUNATELY WE ARE UNABLE TO ACCEPT PHOTOCOPIES

IF YOU WISH LEARNER SERVICES WILL COPY AND RETURN YOUR DOCUMENTS WHILE YOU WAIT

IF YOU CANNOT OBTAIN DOCUMENTS PLEASE CONTACT OUR OFFICE FOR ADVICE.

ALL STUDENTS

- Student's original full birth certificate (*medical cards, baptism certificates, etc. are unfortunately not acceptable*). If original name has been changed evidence of new name is required.
- Evidence of Immigration status if you are not a UK national - submit all Home Office letters
- Where applicable full details of previous funding and/or qualifications
- Student's proof of income prior to and during the course - P60 2011 and latest payslip or DSS certificate at back of this booklet to be fully completed.
- Tax Credit Award Notice – submit most recent letter.
- Where applicable, proof of residency ie council tax bill or current utilities bill ie water, electricity, gas or rent/mortgage agreement.
- Where applicable, birth certificates of the student's dependant children.
- Where applicable, evidence of student's separation or divorce - divorce decree/solicitor's letter including evidence of **all** maintenance payments.
- Signature at section 15 of the application form.

STUDENTS WHO ARE UNDER 25 AND SINGLE AT THE START DATE OF THE COURSE

- If parent(s)/legal guardian was employed during 5 April 2010 - 4 April 2011:-
P60 2010 supporting father's/mother's/legal guardian's earnings or Certificate from Inland Revenue.
- If parents/legal guardian was self employed during 5 April 2010 - 4 April 2011:-
Inland Revenue Self Assessment Tax Calculation form supporting father's/mother's/legal guardian's earnings or Accountant's certificate/self-employed form (*at back of this application*)
- Tax Credit Award Notice – submit most recent letter.
- If parents/legal guardian was in receipt of benefit between 5 April 2010 - 4 April 2011:-
Certificate supplied back of this application should be completed in respect of payment of benefits to father/mother/legal guardian or P60U 2011 issued by the Benefits Agency should be submitted.
- P60 2011 supporting father's/mother's/legal guardian's occupational pension.
- Original birth certificates of dependant children of parent or legal guardian.
- If parents are separated/divorced - divorce decree or solicitor's letter (*must include **all** maintenance payments*).
- Estrangement from parents - submit evidence from social worker, lawyer or other professional body.
- Signature at section 15 of the application form.

STUDENTS WHO ARE UNDER 25 AT THE START DATE OF THE COURSE AND SEEKING INDEPENDENT STATUS

- Evidence to show you have supported yourself for a period of 3 years e.g. P60's since 2008/09 (*see handbook*).

STUDENTS WHO ARE MARRIED OR LIVING AS AN UNMARRIED COUPLE THE START DATE OF THE COURSE

- Your marriage certificate or evidence of status ie. using same surname (*joint tenancy/mortgage agreement*)
- If spouse/partner was employed during 5 April 2010 - 4 April 2011:-
P60 2010 supporting spouse's earnings or a Certificate from Inland Revenue.
- If spouse/partner was self-employed between 5 April 2010 - 4 April 2011:-
Inland Revenue Self Assessment Tax Calculation form supporting spouse's earnings or Accountant's certificate/self-employment form (*at back of his application*).
- If spouse/partner was in receipt of benefits during 5 April 2010 - 4 April 2011:-
Certificate at back of this application should be completed in respect of payment of benefits to spouse or 2011 P60 issued by the Benefits Agency should be submitted.
- P60 2011 supporting spouse's/partner's occupational pension.
- Tax Credit Award Notice – submit most recent letter.

Please note that when we use the term 'parent' it can refer also to an adoptive or step parent.

EQUAL OPPORTUNITIES

We aim to ensure that no applicant receives less favourable treatment than any other on grounds including race, colour, nationality, ethnic or national origins, religion, sex, sexuality, marital status or disability or is disadvantaged by conditions or requirements which cannot be shown to be justifiable.

In order to ensure that the College's Equal Opportunities Policy is being applied effectively, all course applicants are asked to tick the appropriate box below. This is designed to indicate the general racial origin of each applicant. Information supplied is strictly confidential.

Select the response which provides the most accurate description of yourself. Please bear in mind that it is origin pertaining to RACE that is to be indicated - not necessarily place of birth or nationality.

- | | | |
|-----------------------------------------------------|-----------------------------------------------------|-----------------------------------------------------|
| <input type="checkbox"/> Asian | <input type="checkbox"/> Black | <input type="checkbox"/> White Scottish |
| <input type="checkbox"/> Asian | <input type="checkbox"/> Black Scottish | <input type="checkbox"/> White Irish |
| <input type="checkbox"/> Scottish Asian | <input type="checkbox"/> Black British | <input type="checkbox"/> White English |
| <input type="checkbox"/> British Indian | <input type="checkbox"/> Caribbean | <input type="checkbox"/> White Welsh |
| <input type="checkbox"/> Pakistani | <input type="checkbox"/> African | <input type="checkbox"/> Any other white background |
| <input type="checkbox"/> Bangladeshi | <input type="checkbox"/> Any other black background | <input type="checkbox"/> Any mixed background |
| <input type="checkbox"/> Chinese | | <input type="checkbox"/> Any other background |
| <input type="checkbox"/> Any other Asian background | | |

SUPPORT SERVICES

At Stow College we have a wide range of services and facilities available to support learners who experience obstacles to their achievement of their ambitions because of, for example, visual or hearing impairment, mobility problems, dyslexia, Asperger's Syndrome, mental health issues or epilepsy. If you would like to have confidential discussion about the support we can offer and how it might benefit you, please indicate in the box below and we will make contact to arrange a mutually convenient time. You are welcome to ask for such discussion at any time throughout the year, but, of course, the earlier you contact us, the sooner a suitable package of support can be put in place.

- I would like an opportunity for a confidential discussion about the College's support service.

ADDITIONAL SUPPORT NEEDS

If you have an additional support need we would like to ask you to tell us what it is. We may ask for supportive evidence.

In order to assist you we need your consent to provide your details to appropriate staff who will contact you to discuss support

I consent to this information being passed to appropriate Stow College staff

Signature

Date

THANK YOU FOR COMPLETING THIS PART OF YOUR APPLICATION

CERTIFICATION OF DSS BENEFIT RECEIVED

Please use BLOCK CAPITALS

STUDENT

This form should be completed with details of ALL benefits the applicant is currently receiving or any benefit the applicant was receiving during the period 5 April 2011 to present

THE UNDERNAMED IS APPLYING FOR A FULL-TIME FURTHER EDUCATION BURSARY

Student's Name

A If you are/were in receipt of any of the following benefits during the period 5 APRIL 2011 to present: *(please tick)*

<input type="checkbox"/>	JSA	<input type="checkbox"/>	Employment and Support Allowance	<input type="checkbox"/>	Family Credit/Income support
<input type="checkbox"/>	Widowed Mother's Allowance	<input type="checkbox"/>	War Pension	<input type="checkbox"/>	Severe Disablement Allowance
<input type="checkbox"/>	Other Benefit, please provide type _____			<input type="checkbox"/>	Sickness/Incapacity Benefit

THE FOLLOWING CERTIFICATE SHOULD BE COMPLETED BY THE MANAGER OF THE EMPLOYMENT/SOCIAL SECURITY OFFICE FOR THE DISTRICT IN WHICH YOU ARE/WERE REGISTERED

TO BE COMPLETED BY THE DEPARTMENT OF SOCIAL SECURITY OFFICE ONLY

Date Benefit(s) CEASED/WILL CEASE *(must be completed)*

Name

National Insurance Number

Address

is/was in receipt of *(specify type of payment(s))* to the amount of £

Weekly and has been receiving/received payments from *(dates)* to

IS HE/SHE CLAIMING AS A LONE PARENT *(please tick box)* Yes No

Signature of Manager or Clerk

Department of Employment/
Social Security Office

Date

DSS Office Stamp

**THE CHILD/SPOUSE OF THE UNDERNAMED IS APPLYING FOR A
FULL-TIME FURTHER EDUCATION BURSARY/EMA**

Please use BLOCK CAPITALS

PARENT/SPOUSE

Student's Name

B If parent(s) legal guardian/spouse of student was in receipt of any of the following benefits any time during the year 5 APRIL, 2010 to 4 APRIL 2011: (please tick)

<input type="checkbox"/>	JSA	<input type="checkbox"/>	Employment and Support Allowance	<input type="checkbox"/>	Family Credit/Income support
<input type="checkbox"/>	Widowed Mother's Allowance	<input type="checkbox"/>	War Pension	<input type="checkbox"/>	Severe Disablement Allowance
<input type="checkbox"/>	Other Benefit, please state type _____			<input type="checkbox"/>	Sickness/Incapacity Benefit

The following section should be completed by the manager of the employment/social security office for the district in which the parent(s)/legal guardian/spouse is/was registered.

TO BE COMPLETED BY THE DEPARTMENT OF SOCIAL SECURITY OFFICE ONLY

Please include ALL BENEFITS RECEIVED from 5 APRIL 2010 to 4 APRIL 2011

Name

National Insurance Number

Address

is/was in receipt of (*specify type of payment(s)*) to the amount of £

Taxable or Non Taxable

Weekly and has been receiving/received payments from (*dates*) to

Did the parent(s) receive benefits on the basis they were a single parent? YES or NO

Signature of Manager or Clerk

Department of Employment/
Social Security Office

Date

DSS Office Stamp

ACCOUNTANT'S CERTIFICATE FOR SELF EMPLOYED

Bursary Applicant's Name (Student)

Name and relationship to student

Address

Students who are self employed and students whose parent(s)/legal guardians/spouse is/are self employed should arrange for this form to be completed if the self assessment tax calculation 2010/11 is not available.

Please show dates for which information is provided

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A Estimate profits for financial year ending on or before 4 April, 2010

B Add: Charges not allowed for tax purposes

£
£
£
£
£
£

Total of non-allowable charges

C Deduct: Capital allowances

Taxable profits

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Self employed parent(s)/step-parent/legal guardian

Self employed parent(s)/step-parent/legal guardian's spouse

Self employed student

Self employed student's spouse

Total

£
£
£
£
£

Signature of person completing the form

Date

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Name of Accountant

Address

	Official Stamp
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The Inland Revenue Self Assessment Form confirming the annual taxable income will be required before May 2012

DECLARATION BY SELF-EMPLOYED PERSON

I certify that the figures given above have been/will be submitted to Her Majesty's Inspector of Taxes as accurately reflecting my financial position for the year stated. I undertake to inform the Bursary Office of any changes made to this assessment. I understand that the bursary office will request to see my Self Assessment Tax Calculation SA302 2010/2011 as issued by the Inland Revenue as soon as it becomes available.

The college is under a duty to protect the public funds it administers and I understand that if the college ascertains that incorrect financial information has been provided the college may reclaim all or part of any award made.

Signature _____ **Date** _____

OFFICE USE ONLY

AWARD ADJUSTMENT	RE-ASSESSMENT	RE-ASSESSMENT	RE-ASSESSMENT
REASON FOR ADJUSTMENT			
ACTION TAKEN			
MAINTENANCE			
TRAVEL			
COURSE COSTS			
DATE			
Signature			
Co Signature			

OFFICE USE ONLY

ALL STUDENTS

Letter of offer
 Student's birth certificate
 Bank details
 10/11 P60 / DSS Certificate
 Benefits to cease date (if applicable)
 Tenancy Agreement (if applicable)
 Declaration - Signature
 Previous Funding/Qualification
 Residency

Rec'd & Returned	Requested	Information

SELF SUPPORTING STUDENTS
(EXEMPT FROM PARENTAL CONTRIBUTION)

P60's supporting earnings for 3 years
 DSS Certificate covering 3 years
 Confirmation from Inland Revenue
 Social Work letter - estrangement

PARENTAL or GUARDIAN INCOME

Declaration - Signature
 Parents' 2010/11 P60(s)
 Other taxable income
 Tax assessment form/Accountant's Certificate
 DSS certificate
 2010/11 P60 supporting occupational pension
 Birth certificate of dependent children
 Dependant children's award letter
 Proof of separation and Maintenance payments
 Tax Credit Award Notice

MARRIED/ COHABITING STUDENTS

Marriage certificate
 2010/11 P60 supporting partner's earnings
 Inland Revenue confirmation for partner
 Confirmation from Inland Revenue
 Tax assessment form/Accountant's Certificate
 DSS certificate
 Partner's Award Letter
 2010/11 P60 for occupational pension
 Birth certificate of dependent children
 Proof of separation and Maintenance payments
 Tax Credit Award Notice

BOOKS & TRAVEL ONLY

DSS confirmation of Benefit
 Birth certificates of dependent children
 Mobility Allowance
 Confirmation letter from DSS
