

# Further Education Award Application & Assessment Form for Part Time Courses

## 2017/18 Academic Year

Title	Mr <input type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>			
First Names	<input type="text"/>						
Surname	<input type="text"/>						
Date of Birth	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<p><b>You must enclose your original Birth Certificate <u>OR</u> valid Passport (If you were born outside the EU you must enclose your passport and Home Office documents)</b></p>							
National Insurance No.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

State Permanent Home Address

<input type="text"/>	Post Code	<input type="text"/>
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Have you any Dependents? YES  NO

If YES, will you use registered childcare? YES  NO

Do you wish to apply for a childcare grant? YES  NO

The closing date for receipt of applications for courses commencing during the 2017/18 academic year will be

**29 September 2017**

The funding that the Education Authority receives for Further Education Awards is limited and it is not always possible to offer support to every applicant who submits an application by 29 September 2017.

**Eligible students who submit an application by  
30 June 2017 will be guaranteed funding for the  
2017/18 academic year.**

**You must answer all questions. If a section does not relate to you write NONE or N/A.**



**Only fully completed applications will be accepted.  
Incomplete forms will be returned to you and will not be processed.**

## FOR OFFICE USE ONLY

		✓	Date	Initials
Documents returned and valid photocopy retained	Passport			
	Birth Certificate			
	SSA Letter			
	P60			
	TC602			
	Marriage Certificate			
	Divorce / Separation Document			
	Pay Slip			
	Other			
Acknowledged				
Form validated except for the following incomplete sections	Birth Certificate			
	Section 1 - Personal Details			
	Section 2 - Course Details			
	Section 3 - Previous Study			
	Section 4 - Children in the Household			
	Section 5 - About your Benefits			
	S6 - Confirmation of Benefits Certificate			
	Section 6 - Financial Details			
	Section 7 - Contact Details			
Section 8 - Declaration and undertaking for student, spouse or partner				
NOTES				

## Personal details

**a.** Marital Status

Single  Married  Living with Partner  Separated  Divorced  Widowed

If you are separated or divorced you must include evidence.

**b.** Home telephone number

Mobile number

Email address

**c.** Did you live outside the UK and islands at any time between 1 September 2014 and 31 August 2017? YES  NO

**d.** If you answered **YES** at (c) state addresses and dates.

Address	Dates You Were There

**e.** Your bank details

**Account details**

Give the details of the bank account into which you want to receive your payments. **This account must be in your own name.** Please note that missing or incorrect bank details will result in your GRANT payments being delayed.

**Post Office Accounts are not acceptable.**

Sort Code   -   -

Account number

## Course details

- a. Give the name and address of the College or University you will be attending in 2017/18

	Post Code	

- b. Which campus of the college will you be attending in 2017/18?

- c. Give the full name and level of the course (This form is for Level 1, Level 2 or Level 3 courses only)

- d. Give the QCF code for the course (This code will not be available if your course is an Access course)

			/					/	
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- e. What length is the course? Please tick the relevant box.

1 Year		2 Years	
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- f. Which year of the course will you enter in September 2017? Please tick the relevant box.

Year 1		Year 2	
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Most common reasons why we will **NOT** offer funding:-

- you already hold a HND, Degree or any qualification above Level 3 obtained within the last 10 years.
- you received funding for a course within the last 10 years which was the same level as the course you wish to study this year.
- you are under 19 years of age at 1 July 2017

**If you fall into any one of the categories above  
DO NOT CONTINUE WITH THIS APPLICATION**

## Previous study

- (a) Have you previously received a Further Education Award or a Student Loan? If yes, please give details below. YES  NO

- (b) Please tick which of these boxes best describes your qualifications to date – you may need to tick more than one box.

	What year were you on the course	Did you complete the course and obtain a qualification YES / NO	If you attempted the course but did not finish state number of years/ months spent on course
<input type="checkbox"/> No formal qualifications	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> GCSE/A Levels	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> GNVQ/AVCE	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> First Diploma	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> BTEC National Diploma	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> NVQ Level 1	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> NVQ Level 2	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> NVQ Level 3	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> NVQ Level 4	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> HNC	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> HND	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> Degree	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> Foundation Degree	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> PGCE	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> Other	<input type="text"/>	<input type="text"/>	<input type="text"/>

**Additional Information**

Use this box if you wish to give any additional information about your previous study.

# 4 SECTION

## Children in the household

Give details of children who are dependent on you during academic year 2017/18

NAME	Date of Birth	School or College they will attend during 2017/18 school year

# 5 SECTION

## About your benefits

**If you or your spouse or partner ARE receiving Income Support, Income Based Job Seekers Allowance or Tax Credits give details below.**

If you or your spouse or partner are receiving one or more of the following state benefits **please tick the appropriate box and forward evidence**

- |                                    | Student                      |                             | Spouse or partner            |                             |
|------------------------------------|------------------------------|-----------------------------|------------------------------|-----------------------------|
| 1. Income Support                  | YES <input type="checkbox"/> | NO <input type="checkbox"/> | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
| Income-based Jobseeker's Allowance | YES <input type="checkbox"/> | NO <input type="checkbox"/> | YES <input type="checkbox"/> | NO <input type="checkbox"/> |

If you receive Income Support or Income Based Jobseeker's Allowance you should complete Part A of the certificate opposite and take it to your local Jobs and Benefits office for them to complete Part B.

**If YES complete S6 and go to Section 7  
If NO go to Question 2**

- |                |                              |                             |                              |                             |
|----------------|------------------------------|-----------------------------|------------------------------|-----------------------------|
| 2. Tax Credits | YES <input type="checkbox"/> | NO <input type="checkbox"/> | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
|----------------|------------------------------|-----------------------------|------------------------------|-----------------------------|
- Enclose current tax credit notification*

**If YES go to Section 7  
If NO go to Section 6**

## EDUCATION AUTHORITY

### Confirmation of Benefits for Part Time Further Education Awards 2017/2018

#### PART A

This section must be completed by you, the student. If you or your spouse or partner are receiving any of these benefits, you only need to get confirmation that one of you receives it.

#### Student Details

Forename(s):

Surname:

National Insurance Number:

        

Address:




Postcode:

College attended:

#### Details of Spouse or Partner

Forename(s):

Surname:

National Insurance Number:

        

Address:




Postcode:

**Benefit details:** From the following list, please tick the benefits received.

Income-based Job Seeker's Allowance

Income-based Job Seeker's Allowance

Income Support

Income Support

Name of benefit office dealing with your claim

**I authorise the completion of Part B of this certificate**

Signed: \_\_\_\_\_

*Student*

Signed: \_\_\_\_\_

*Spouse or partner of student*

**PART B**

**TO BE COMPLETED BY THE BENEFIT AGENCY AND RETURNED TO THE EDUCATION AUTHORITY**

The student named in Part A of this form has applied for a student grant for part-time study. A grant can be paid if, at the time of application for a grant, either a student or his or her spouse or partner are receiving either Income-based Jobseekers' Allowance or Income Support.

Please complete this section of the form to confirm that the student or his or her spouse or partner receives one of these benefits. If both the student or his or her spouse or partner receive benefits, or if either receives one or more of the benefits, you only need confirm that **one** of them is receiving **one** of these benefits.

Tick **one** of these boxes, as appropriate, then sign, date and stamp the form and return it to the Education Authority, Further Education Awards Section, 1 Hospital Road, Omagh, Co Tyrone, BT79 0AW.

**I certify that to the best of my knowledge and belief that, as at the date below, the claimant named in Part A is being paid the following benefit.**

Income-based Job Seekers' Allowance

Income Support

Official Stamp

***Note for Jobs and Benefits Office:***

***This grant is for fees, books and stationery. It is NOT a grant for living expenses.***

Signed: \_\_\_\_\_

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



## Financial details

If you or your spouse or partner **ARE NOT** receiving Income Support, Income Based Job Seekers Allowance or Tax Credits give details below

Name of spouse or partner

Relationship to student

Address

**Income - state your gross income in the boxes below, please indicate whether payments you receive are weekly (w), fortnightly (f), monthly (m), 4 weekly (4) annual (a) –**

<i>eg</i>		Frequency		Frequency
Salary	£ 12,000	a	£ 1,000	m

	Student		Spouse
Q.1 Do you receive a salary or wage? <i>Enclose your last monthly pay slip or last 4 weekly pay slips</i>	YES <input type="checkbox"/> NO <input type="checkbox"/>	Frequency	YES <input type="checkbox"/> NO <input type="checkbox"/>
	£ <input style="width: 60px;" type="text"/>	<input style="width: 20px;" type="text"/>	£ <input style="width: 60px;" type="text"/>
Q.2 Are you self-employed? <i>Give details for year ended 5 April 2016</i> <i>Enclose your tax calculation / accountant's letter</i>	YES <input type="checkbox"/> NO <input type="checkbox"/>	Frequency	YES <input type="checkbox"/> NO <input type="checkbox"/>
	£ <input style="width: 60px;" type="text"/>	<input style="width: 20px;" type="text"/>	£ <input style="width: 60px;" type="text"/>
Q.3 Do you currently receive any taxable social security benefits? <i>e.g. Incapacity Benefit, Carers Allowance, etc. Enclose evidence</i>	YES <input type="checkbox"/> NO <input type="checkbox"/>	Frequency	YES <input type="checkbox"/> NO <input type="checkbox"/>
	£ <input style="width: 60px;" type="text"/>	<input style="width: 20px;" type="text"/>	£ <input style="width: 60px;" type="text"/>
Q.4 Do you currently receive any pensions? <i>e.g. retirement pension, occupational pension etc. Enclose evidence</i>	YES <input type="checkbox"/> NO <input type="checkbox"/>	Frequency	YES <input type="checkbox"/> NO <input type="checkbox"/>
	£ <input style="width: 60px;" type="text"/>	<input style="width: 20px;" type="text"/>	£ <input style="width: 60px;" type="text"/>
Q.5 Other income you currently receive (please specify) <i>Enclose evidence</i>	YES <input type="checkbox"/> NO <input type="checkbox"/>	Frequency	YES <input type="checkbox"/> NO <input type="checkbox"/>
<input style="width: 350px; height: 25px;" type="text"/>	£ <input style="width: 60px;" type="text"/>	<input style="width: 20px;" type="text"/>	£ <input style="width: 60px;" type="text"/>

**Go to Section 7**

## Contact details

Please give the names and addresses of two contacts. The contacts you give **should live at different addresses** and will only be contacted if, for example, you move address and do not inform us. You **must** inform your contacts that you are providing us with their details.

### Contact 1

Forename(s):
Surname:
Relationship to you:
Address:
Postcode:
Country:
Phone number:

### Contact 2

Forename(s):
Surname:
Relationship to you:
Address:
Postcode:
Country:
Phone number:

**Go to Section 8**

## Declaration and undertaking for student

In the event that the Education Authority offers an award under the Further Education Award Arrangements:

1. I undertake to attend and to complete the course.
2. I undertake to inform the Education Authority immediately of any change in financial or other circumstances affecting the amount of grant payable to me.
3. I undertake to refund any overpayment which may have occurred (for any reason) if the Education Authority is required to reduce the amount of my award.
4. I certify that the details on this form are correct and that no information relevant to the application has been withheld.

Signature of Applicant ..... Date .....

## Declaration for spouse or partner *(if applicable)*

- I confirm that to the best of my knowledge and belief, the information I have provided is true and complete. If it is not I understand I might be prosecuted and financial support withdrawn from the student.
- I agree to supply any further information in relation to the student's application for financial support that the Education Authority may ask for and agree to tell them immediately if my circumstances change in any way that might affect this application for financial support.

Signature of student's spouse/partner  
 ..... Date .....

### CHECKLIST

1. Have you enclosed your birth certificate or valid passport?
2. Have you enclosed proof of separation or divorce (if applicable)?
3. Have you completed all sections of the form? **DO NOT** leave any section/box blank.
4. Have you given your bank details?
5. Have you enclosed verification of income, e.g. pay slips, tax calculation, etc?
6. Have you and your spouse/partner (if applicable) signed the form?

**Please return completed form to:  
Education Authority  
Further Education Awards Section  
1 Hospital Road  
Omagh  
Co Tyrone BT79 0AW**

### **!!! REMEMBER !!!**

Get the envelope weighed before you return it so that you pay the correct postage amount.

If you don't your application may be delayed.

**If you are posting your application close to the published closing dates you should obtain a receipt of postage or you may wish to consider using an alternative method of postage, e.g. next day delivery. You should note that this will cost you more than the normal cost. You should retain your receipt of postage as proof.**

The information provided on this form may be made available to other departments/agencies for the purposes of preventing or detecting crime.

## Data Protection Act 1998

This statement sets out who will use the information provided on the Further Education Award Application Form and what they will use it for.



The information which you, your husband, wife, partner or relatives give on this form ("your personal information") will be used to process your further education award application. The Department for the Economy has made arrangements for certain functions relating to student finance applications to be exercised by the Education Authority (EA).

**The EA** will need the information provided in connection with your application to determine whether you are eligible for student finance and to assess the maximum amount of financial support you are entitled to. The EA is the data controller for that information. The EA will need to keep personal information about you, your husband, wife, partner or relatives so that it can audit its assessment of financial support. If you would like to see your information please contact the EA.

**Your university or college** will receive information from the EA so that the EA can pay any tuition fee grant you are entitled to, and so that it can confirm the details of your course of study. Your university or college may ask for information that is derived from your application (for example, whether you are deemed eligible for a further education award). If you would like to see this information please contact your university or college.

**The Department for the Economy (DfE)** will have access to some information and may use the information you have provided on this form to monitor the performance of the student finance support system and to develop future policy. Any published output from this statistical work will be anonymous and will not identify individuals.

### **The Social Security Agency.**

Information will be shared with the Social Security Agency to confirm benefit entitlement of you, your husband, wife, partner or relatives.

By law, the EA and your university or college must protect the public funds they handle and may use the information you have provided on this form to prevent and detect fraud. They may also share the information, for the same purposes, with other organisations which handle public funds.

## FOR OFFICE USE ONLY

		✓	Date	Initials
REF				
REASON				
OFF/MA				
AP/ED				
BA - PP				
REASSESSED				
NOTES				