

## Higher Education Application Form – 2011/12

Please carefully read our guidelines before you start to complete this application form. If you are not sure whether you are eligible for an award or which application form to use please call us on 020 7726 4230.

### Who should use this form?

If you are studying for a Foundation Degree, Degree (e.g. BSc, BA, LLB or BEng), Higher National Certificate or Diploma (HNC or HND) or an essential post graduate qualification please use this form.

If you are studying at one of the institutions listed below please contact your student advisor about making an application. This is because we run a partnership fund with these universities and colleges;

- Birkbeck, University of London
- University of the Arts London
- City and Islington College
- Westminster Kingsway College
- City University

### Are you eligible to apply?

Before you complete the rest of this form please answer the following questions:

Have you: a) lived, worked or studied in one of the London Boroughs of Camden, City of London or Islington for at least the last 12 months, or b) lived or worked in this area for at least 2 out of the last 10 years?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Will you be aged 40 or under at the end of your course?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you applying for financial support to help with costs of your education? For example, equipment, travel costs, course fees or books.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you applied for all the statutory funding that is available to you such as a student loan for tuition fees and maintenance costs, NHS bursary, career development loan or University bursary?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you contacted the Student Finance Officer or Welfare Officer at your college or university and applied for any financial assistance that you may be eligible for?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you a British Citizen, EU Citizen, Asylum Seeker or do you have recognised permission to remain in the UK such as indefinite leave to remain, exceptional leave to remain or humanitarian protection?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you studying for your first under graduate level qualification or an essential post graduate qualification?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

! If you have answered 'no' to any of the questions above you will not be eligible for a grant from Richard Reeve's Foundation and we will be unable to help you. You should speak to the Student Financial Advisor at your college or university for advice on where to find alternative support.

**APPLICATION CHECKLIST**

Please enclose **photocopies** of the following documents (please **DO NOT** send us originals)

Document required	Enclosed (✓)
Fully completed and signed application form (including the data protection act and monitoring forms)	
A recent utility bill for your home (gas, electricity, telephone, water etc.)	
A recent bank statement showing all your income and expenditure for at least one whole month	
Proof of your own income	
Your financial notification letter the Student Loan Company setting out the amounts you are entitled to for maintenance costs and tuition fees <b>AND / OR</b> a letter confirming how much you will receive from an NHS Bursary (or equivalent)	
A letter from your Student Advisor stating the outcome of your application for Access to Learning or Hardship Funds and, if successful how much you received	
If you pay for childcare, a receipt or paid invoice from your childcare provider	
Proof of income of your parent(s)/guardian(s)/partner (e.g. wage slip, P60, letter from Department of Work and Pensions, bank statements)	
Refugee applicants: Home Office documentation confirming refugee/leave to remain status	
If you are requesting funds towards a final year project or dissertation, a breakdown of the costs involved.	
Post graduate students: Please make sure you enclose the additional information as stated on our website <a href="http://www.richardreevesfoundation.org.uk/ipostgrads.html">www.richardreevesfoundation.org.uk/ipostgrads.html</a>	

! If you do not send us copies of all the documents we need your application may be delayed. If you are not sure what you need to send us, please call us on 020 7726 4230 or email [enquiries@richardreevesfoundation.org.uk](mailto:enquiries@richardreevesfoundation.org.uk)

**Please tell us where you heard about the Foundation:**

	(✓)
Richard Reeve's Foundation Website	<input type="checkbox"/>
Student Advisor	<input type="checkbox"/>
Received funding from the foundation before	<input type="checkbox"/>
Leaflet	<input type="checkbox"/>
Word of mouth	<input type="checkbox"/>
Referral from another agency	<input type="checkbox"/>

**Helping Young People Stay on Course**

Other, please state

**1. About You**

First name:

Last / family name:

Address:

Email:

Phone number:

Postcode:

Mobile number:

How long have you lived at this address?

Which London Borough do you live in?

Date of birth:

Nationality:

What is your residential status in the UK? *(please tick)* British Citizen EU Citizen Asylum Seeker Indefinite Leave to Remain Humanitarian Protection Discretionary Leave to Remain Other, please state:

If you have limited leave to remain in the UK when does this expire?

For refugee students, please tell us the date you first arrived in the UK:

*(month/year)***2. Your Home Circumstances**Are you *(please tick)* single married / civil partnership separated divorced widowedWho do you live with? *(please tick)* your parents guardian partner independently on your own other

Do you have any brothers or sisters living at home with you?

**YES / NO** *If yes, how many?*

Do you have any children who live with you?

**YES / NO** *If yes, how many?*Are you *(please tick)* in local authority care a care leaver estranged from your parents none of these**3. About Work and Volunteering**

Do you have a job?

**YES / NO** *If yes, how many hours per week do you work?*

If you are not working at the moment, please explain why. For example, your status in the UK may not allow you to work or you may have other responsibilities:

Do you do any voluntary work?

**YES / NO***If yes, please provide the name and contact number of someone we can speak to about your volunteering activities:*

**Helping Young People Stay on Course**

Contact name:

Telephone number:

**4. Your Financial Details**

Please tell us about your income and expenditure

<b>INCOME</b>	<b>Monthly</b>	<b>EXPENDITURE</b>	<b>Monthly</b>
Applicant's salary	£	Rent / mortgage / service charge	£
Parent or partner salary	£	Bills including gas, electricity, water	£
Income support / jobseekers allowance	£	Telephone or mobile	£
Child benefit	£	Council tax	£
Working or Child Tax Credits	£	Food and groceries	£
Other state benefits	£	Travel costs	£
Pension or pension credit	£	Clothing	£
NASS support	£	Entertainment	£
Student loan	£	Childcare	£
Grant and/or bursary	£	Other for example, insurance or loans	£
<b>Total Monthly Income</b>	<b>£</b>	<b>Total Monthly Expenditure</b>	<b>£</b>

Do you have any savings?

**YES / NO** *If yes, how much?*  
£

What was the total annual household income used by your Local Education Authority to assess your loan entitlement?

£

Have you taken out a student loan for maintenance costs?

**YES / NO** *If yes, how much?*  
£

Have you taken a loan out to pay your tuition fees?

**YES / NO** *If yes, how much?*  
£

Did you get a Higher Education or Special Support Grant?

**YES / NO** *If yes, how much?*  
£

Did you receive a bursary from your university?

**YES / NO** *If yes, how much?*  
£

Did you receive a bursary from the NHS?

**YES / NO** *If yes, how much?*  
£

Have you applied to the Access to Learning Fund (ALF)?

**YES / NO** *If yes, how much?*  
£Have you applied to any other charitable trusts or foundations? **YES / NO** *If yes, which ones and how much did you receive?*Do you have any debts or housing arrears? **YES / NO** *(if yes, please specify in detail)**For example: Barclays credit card used to buy laptop. Total owed £635*

**5. Your Education Since the Age of 11**

From / To	Name of School or College	Subjects studied	Qualification & grade

**6. About Your Course**

Name of the University / College you attend:		Which campus are you based at?	
Address of the University / College:		What is the title and subject of your course	
When did you start the course?	(month/year)	When does it finish?	(month/year)
What is the annual tuition fee for your course?		University / College Student ID Number:	
Is your course <i>(please tick)</i> <input type="checkbox"/> full time <input type="checkbox"/> part time		Name and contact number of your course tutor:	
What do you intend to do on completion of your course?			

**7. Getting To University / College**

How do you get to University / College? <i>(please tick)</i>					
<input type="checkbox"/> walk	<input type="checkbox"/> train	<input type="checkbox"/> tube	<input type="checkbox"/> bus	<input type="checkbox"/> car	<input type="checkbox"/> other
Do you have a Transport for London 18+ Student Oyster card (30% discount card)?					<b>YES / NO</b>
Do you use Oyster pay as you go?			<b>YES / NO</b> <i>If yes, how much do you spend getting to university per week? £</i>		

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Do you buy a weekly or monthly travel card?

**YES / NO** If yes, how much is this?  
£**8. What Do You Need Help With?**

Please tell us what you need funding for and how much you are applying for (if you are asking for help with equipment or course fees, it will help if you provide an equipment list or fee invoice):

Books	£	Course fees	£
Equipment	£	Living costs	£
Travel	£	Other	£
Field Trips	£	<b>Total applied for:</b>	<b>£</b>

**9. Supporting Statement**

Please use this space to explain why you need help with your educational costs. Make sure you have read the guidelines and remember the Foundation will only support students who clearly demonstrate why they need extra support to complete their chosen course. Please use an extra sheet if necessary.

**10. Declaration**

I declare that the above information is correct and truthful. I understand that providing false information is an offence that may lead to disqualification for a grant and prosecution. I agree that the information given on this form may be processed by the Foundation in accordance with the Data Protection Act.

**Signed****Date**

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You should send your completed application and photocopies of all supporting documents to:

**Richard Reeve's Foundation, 2 Cloth Court, London, EC1A 7LS**

**DATA PROTECTION ACT*****Please read this very carefully***

In order for us to be able to process your application for help it will be necessary for us to ask you for personal information such as family life, health, finance and background. The Data Protection Act is in place to make sure that organisations do not misuse such information. To comply with the Act we need to have your consent to hold your information in our computer or manual files, and use this to approach other Trusts and charities on your behalf.

**What we will do with your information**

- Once we have received your information (and your agreement) we will open a case file. This will be kept in our filing system. Any additional information that you may send us or which we receive from people such as doctors, health visitors, educational psychologists, social workers or teachers will be put into your file.
- Brief summaries of the information on the file will be held on our computer system.
- We will not keep this information any longer than we need to. All the papers on your file will usually be shredded within seven years of our last contact with you. Most of the information held on computer will be destroyed at the same time.

**Other people you have to tell us about**

Your application will contain personal information not only about you but also possibly about other people, for example your parents or partner. If this is the case please show this form to the people involved, and make sure that they agree we can store and use their information in your case file.

Sometimes you may not want to show this form to others or obtain their consent. For example, you would not want to get in touch with a violent or unhelpful ex-partner, you might not want to involve children who you felt were too young or vulnerable, or there might be others with whom you have lost contact. We would not expect you to obtain their consent in such cases. Please just let us know who they are below.

Please be assured your information is safe with us, and will not be used for any purpose other than your application for financial assistance.

I consent to the Foundation holding and processing information about me and my family in its computer and manual files, and authorise it to contact other Trusts and Charities and, if necessary schools or colleges that I have previously attended, am currently attending or am hoping to attend, and to discuss my application with them and/or pass relevant information to them as appropriate. I understand that this may include a short report on my progress and attendance.

Name of Applicant

Signature of Applicant

Date

Name(s) of other(s) giving consent

Signature of other(s) giving consent

Date

**MONITORING FORM**

We would be very grateful if you would complete this form indicating which of the following options best applies to you. This form helps the Foundation to ensure it is receiving applications from all sections of the community. Information you provide is for monitoring purposes only and will not be used in the assessment of your application.

First name:	Last / family name:
Nationality:	Date of Birth:
Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	
I would describe my ethnic origin/heritage as <i>(please tick)</i> :	
<input type="checkbox"/> White, UK Heritage <input type="checkbox"/> White, European <input type="checkbox"/> White, Other <input type="checkbox"/> Bangladeshi <input type="checkbox"/> Indian <input type="checkbox"/> Pakistani <input type="checkbox"/> Asian, Other	<input type="checkbox"/> Black, African Heritage <input type="checkbox"/> Black, Caribbean Heritage <input type="checkbox"/> Black, Other <input type="checkbox"/> Mixed Race <input type="checkbox"/> Turkish <input type="checkbox"/> Other Ethnic Group <input type="checkbox"/> Prefer Not to Say
Do you have a disability? <i>(please tick)</i>	Are you registered disabled? <i>(please tick)</i>
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

**DATA PROTECTION**

I agree that the information given on this form may be processed by the Foundation in accordance with the Data Protection Act, in particular, for the purpose of equal opportunities monitoring. I agree to the storage of this information on manual and computerised files and understand that this information is used for monitoring purposes only.

**Signature****Date**