Heart of Worcestershire College

Application for

HE Financial Support

HE Boost | HE Hardship Fund | 20/21

Space for date stamp (Office use only)	
Bursary no.	Student no.

Please complete all relevant sections of the form in BLOCK CAPITALS & BLACK PEN (tick where appropriate).					
Section 1 : Student Details					
First name Su	ırname	Date of birth	Age on 31st	August 2020	
Who do you live with: Parent	ts Spouse/Partner	☐ On my own ☐ O	ther		
How many Dependents live in your household?		Are you or do you live with a single parent?			
Is your household income less that year (a copy of Student Finance award notice is required)	ce England	n you confirm that you ding (such as Employe ning and Developmen	r, the NHS Bursary o	r the Yes	
Section 2 : Your Cours	е				
Course Title		Level		☐ Full Time	
				☐ Part Time	
Section 3: HE Hardship Fund Criteria					
To qualify you must be in receipt of all Student Finance England assistance you are eligible for. You could get extra money if you are experiencing financial hardship. You may be for example:					
A part-time student with child especially single parents	dren, • From a low inco • Homeless or livi		A student that was p care (a care leaver)	oreviously in	
The rules are different dependir	ng on when your course s	tarted:			
What date did you start your c	ourse?		■ Full-time ■ Pa	art-time	
Section 4 : Evidence	Please	ick to indicate what t	ype of evidence you	have provided.	
If Student Finance England used	d your parent's income to	assess your award pl	ease provide:		
☐ Your student finance breakd	lown ☐ Your parents'/g credit award no		Three recent and co		
PLUS	Your parents'/g	uardians' P60s or	guardian in the hous	•	
If Student Finance England used	d your income to assess y	your award please pro	vide:		
☐ Your student finance breakd			☐ Three recent and consecutive bank statements for you and your partner (if you have one)		
PLUS	☐ A P60 or three and your partne	payslips for you er (if you have one)			
If you are a care leaver or LAC s Your student finance breakd PLUS		fter from Social re provider	A P60 or three pays and your partner (if Three recent and co bank statements for	you have one) nsecutive	
IF YOU CANNOT PROVIDE EVI PROCESS YOUR APPLICATION	DENCE THEN WE CANN	от	partner (if you have		





Section 5: Assistance

Please tick which support you require Support Available W Hardship for Full-Time Student Childcare for Part-Time Student Boost Award (Closing date for Boost application is 9th October) Section 6: Childcare (for part-time students only) Please tick if you require help with the cost of childcare of childcare during the timetabled hours of my course, not including holidays. Please note: Students are responsible for the payment of childcare until the College has formally agreed to contribute to the cost. Have you provided a copy of you child/children's birth certificate/proof of Child Benefit? Wes Section 7: Statement to support application Please provide any further information you think we should know to support your bursary application? Please provide and the provided	Section 5 : Assistance				
Hardship for Full-Time Student Childcare for Part-Time Student Boost Award (Closing date for Boost application is 9th October) Section 6: Childcare (for part-time students only) Please tick if you require help with the cost of childcare * Please complete separate form I am requesting financial assistance to cover the cost of childcare during the timetabled hours of my course, not including holidays. Please note: Students are responsible for the payment of childcare until the College has formally agreed to contribute to the cost. Have you provided a copy of you child/children's birth certificate/proof of Child Benefit? Years Grant (NEG Funding) for your child/children? Yes No Section 7: Statement to support application Please provide any further information you think we should know to support your bursary application?	Please tick which support you req	uire	Office use of	only	
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Childcare for Part-Time Student Boost Award (Closing date for Boost application is 9th October) Section 6: Childcare (for part-time students only) Please tick if you require help with the cost of childcare = * Please complete separate form I am requesting financial assistance to cover the cost of childcare during the timetabled hours of my course, not including holidays. Please note: Students are responsible for the payment of childcare until the College has formally agreed to contribute to the cost. Have you provided a copy of you child/children's birth certificate/proof of Child Benefit? Years Grant (NEG Funding) for your child/children? Yes No Section 7: Statement to support application Please provide any further information you think we should know to support your bursary application?	Hardship for Full-Time Student				
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I am requesting financial assistance to cover the cost of childcare during the timetabled hours of my course, not including holidays. Please note: Students are responsible for the payment of childcare until the College has formally agreed to contribute to the cost. Have you provided a copy of you child/children's birth certificate/proof of Child Benefit? Has your childcare/child-minder applied for an Early Years Grant (NEG Funding) for your child/children? Yes No Section 7: Statement to support application Please provide any further information you think we should know to support your bursary application?	Section 6 : Childcare (fo	r part	-time stud	lents only)	
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Please provide any further information you think we should know to support your bursary application?	certificate/proof of Child Benefit?		Years Grant (NEG Funding) for your child/children?		
	Section 7: Statement to	suppo	ort applica	tion	
		acion you	CHILIK WE SHOO	and know to support your k	Juisary application:

Section 8: Student Bank Details Sort Code Account Name Bank Name Account Number If you fail to provide YOUR bank details your application will not be processed. **Section 9: Privacy and your data** Heart of Worcestershire College collects and processes personal data relating to its learners to effectively manage your learning and to meet its statutory obligations as a Further Education College; the College is the Data Controller for this information. The College is committed to being transparent about how it collects and uses that data and to meeting its data protection obligations. The full Privacy Notice and associated policies can be viewed online at www.howcollege.ac.uk, and these detail what, how and why we collect data, as well as how it is stored, and your rights relating to that data. We can also supply a printed copy and alternative formats upon request; we can also help explain anything you do not understand - please ask a member of staff. **Section 10: Student Declaration** I declare that the information on this form is true and accurate to the best of my knowledge. I have made this claim for bursary payment, fully aware that false statements can lead to withdrawal/refusal of financial support and may lead to open prosecution. I understand that if I refuse to provide evidence relevant to my claim the application will not be accepted. I will attend regularly and complete the course for which my bursary is supporting me. • When changes to my household financial circumstances occur, I will notify my institution immediately. I will notify my institution immediately of any changes to my bank details. I understand that monies I received under the bursary scheme have been awarded to provide me with financial support to allow me to continue in education and if I leave education all financial support will stop. I understand that I do not have an automatic entitlement to bursary payments, and all payments are based on the information I have provided. I understand that I have the right to appeal if I disagree with the outcome of my bursary application. This appeal should be made to my institution and I can follow the complaints procedures explained during the induction/ welcome programme.

Redditch & Bromsgrove: studentfinance-redditch@howcollege.ac.uk Worcester & Malvern: studentfinance-worcester@howcollege.ac.uk

Applicant signature

I confirm the above declaration \square

Please return the completed form and evidence to:

Please sign or enter your name - you may be contacted to confirm your identity

Date





Section 1: Student Details					
Student name		Student number	Fund		
Course			Course code		
Section 2: Awa	ard Grant				
Meeting Date:		Bursary No.			
Grant	Amount	Notes: Transfers, Journal, BACS, 6	etc		
Fees & Exams	£				
Bursary	£				
Uniform/Equipment	£				
Trips	£				
Train	£				
Bus	£				
Car/Moped Fuel	£				
Childcare	£				
Mealcard	£				
Other	£				
TOTAL	£				
Notes:					
Sign		Sign	Sign		
Section 3: Additional Award					
Bursary No.					
Date	Amount	Notes			
	£				
	£				
	£				
TOTAL	£				
Student officer sign	atura		Data		