



# BANFFSHIRE EDUCATIONAL TRUST

## FURTHER EDUCATION GRANT APPLICATION FORM

This form is to apply for a grant for further education, higher education, post-graduate education or adult education courses or apprenticeships

Write in BLOCK CAPITALS using black or blue pen.

Privacy Notices are available to explain how personal information may be collected, used, stored, shared and securely disposed of, the legal basis for doing so, and what your Data Subject Rights are. Privacy Notices are available from our website at [www.moray.gov.uk/moray\\_standard/page\\_142831.html](http://www.moray.gov.uk/moray_standard/page_142831.html)

### SECTION A: APPLICANT DETAILS

Full name of applicant: \_\_\_\_\_

Address of applicant: \_\_\_\_\_

\_\_\_\_\_  
Postcode: \_\_\_\_\_

Telephone number: \_\_\_\_\_ Date of birth: \_\_\_\_\_

Email Address: \_\_\_\_\_

How long have you been resident at the above address? \_\_\_\_\_

How long have you been resident in the Banffshire area? \_\_\_\_\_

### SECTION B: INFORMATION ON YOUR PROGRAMME OF STUDY

Place of study: \_\_\_\_\_

Title of course: \_\_\_\_\_

What qualification will you gain on completion of the course? \_\_\_\_\_

|                                  |                                |                                                                        |
|----------------------------------|--------------------------------|------------------------------------------------------------------------|
| Is the course full or part time? | How long does the course last? | Which year of study does this application refer (for example, year 1)? |
| _____                            | _____                          | _____                                                                  |

|                             |                    |
|-----------------------------|--------------------|
| Course start & finish dates | Future career plan |
| _____                       | _____              |

Please turn to page 2

## SECTION C: INFORMATION ON THE COST OF YOUR PROGRAMME OF STUDY

Please include evidence of all costs with your application form

Please state your proposed place of residence during the session to which this application applies:

(for example: parental home, own home, halls of residence, lodgings, etc)

Weekly accommodation cost: £

Weekly travel cost to college: £

Other fees (please specify): £

Please give details of any SAAS student loan, bursaries, student allowances, grants, sponsorship, scholarship, etc for either the course to which this application refers, or awarded in the past:

(please include name of awarding body, annual value of award, start date and duration of award)

## SECTION D: INFORMATION ON YOUR PREVIOUS STUDIES AND EMPLOYMENT

Last secondary school or college attended:

Start date:

End date:

Please give details of all qualifications achieved:

Place of employment:

Job title:

Start date:

End date:

Please turn to page 3

## SECTION E: PARENT / CARER DETAILS AND HOUSEHOLD INCOME\*

\* The term 'Parent' or 'Carer' refers to the young person's mother, father, carer, step-parent or parent's partner who lives in the same address detailed in Section A of this form.

If the young person detailed in Section A of this form lives on their own, then the young person should include their own income below instead of the income of the parent / carer.

### Parent / Carer 1

### Parent / Carer 2

Name (including title):

Relationship to young person:

(e.g. parent, step-parent)

Marital status:

Daytime telephone number:

Are you in receipt of Housing Benefit or Council Tax Reduction **from Moray Council**?

Yes

☐

No

☐

If **yes**, do you consent to share the income, savings and household information that was used to assess your entitlement to Housing Benefit and/or Council Tax Reduction being used for the purposes of processing the application?

Yes

☐

No

☐

If you have answered **Yes** above, **please sign and date the Declaration at Section F**

If you have answered **No** above, you need to provide income evidence information:-

### Parent / Carer 1

### Parent / Carer 2

Occupation:

Annual employment income:

(please enclose P60)

£

£

Annual self employment income:

(please enclose tax return form)

£

£

Annual income from Benefits:

(please enclose your most recent Universal Credit Awards Notice or letter from Department of Work & Pensions)

£

£

Annual income from pensions which are liable to tax – state, private, armed forces, widow's pension, etc:

(please provide evidence)

£

£

Annual income from alimony or maintenance payments

(please provide evidence)

£

£

Annual income from any other source:

(please provide evidence)

£

£

**Total gross annual income:**

£

£

Lone parent household? (if yes, please provide proof – for example, a Council Tax Notice showing single adult household discount)

**Please turn to page 4**

## SECTION F: DECLARATION

I declare that, to the best of my knowledge, all of the information I have given in this application is full and correct in every respect. I undertake to supply any additional evidence which may be required by the Education Authority to verify the information given, and also to inform the Authority immediately of any change in financial or other circumstances which might affect the value of any Grant awarded.

Should the amount of the Grant be revised for any reason, I undertake to refund any amount received by me in excess of the revised amount. I understand that the giving of false information, withholding of relevant information or failure to comply with the conditions of award may lead to the termination of any Grant and to the recovery of any amounts paid by the Education Authority.

Signature of applicant:

Date:

\_\_\_\_\_

\_\_\_\_\_

Signature of parent/carer:

Date:

\_\_\_\_\_

\_\_\_\_\_

## SECTION G: PAYMENT OF AWARD

The closing date for applications is 30<sup>th</sup> September each year. If your application is received after this date it will be held until the following year. Any award from the Trust will be paid directly into a bank account via a BACS transfer.

## SECTION H: EQUAL OPPORTUNITIES MONITORING

Please complete the Equal Opportunities Form on page 6.

Place it in a separate envelope marked PRIVATE & CONFIDENTIAL and send it with your application form.

Please send your completed application form to:

Education, Moray Council, High Street, Elgin, IV30 1BX

If you have any queries please contact Education at the address above, or telephone 01343 563374, or email [education@moray.gov.uk](mailto:education@moray.gov.uk)

**Please ensure that all documents for proof of income have been included. Failure to send in the relevant documents will delay the processing of your application.**





# EDUCATIONAL TRUST APPLICATIONS EQUAL OPPORTUNITIES FORM

Place this completed form in a separate envelope marked PRIVATE & CONFIDENTIAL and send it with your application form.

Equal Opportunities forms are separated from Trust application forms and are used for statistical purposes only.

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| Date of birth |
|---------------|
|               |

| Ethnic Origin (please tick one category)        |  |
|-------------------------------------------------|--|
| White – Scottish                                |  |
| White – Other British                           |  |
| White – Irish                                   |  |
| White – Polish                                  |  |
| White – Other                                   |  |
| White – Gypsy/Traveller                         |  |
| African – African/Scottish/British              |  |
| African – Other                                 |  |
| Caribbean or Black – Caribbean/British/Scottish |  |
| Caribbean or Black – Other                      |  |
| Asian – Indian/British/Scottish                 |  |
| Asian – Pakistani/British/Scottish              |  |
| Asian – Bangladeshi/British/Scottish            |  |
| Asian – Chinese/British/Scottish                |  |
| Asian – Other                                   |  |
| Mixed or multiple ethnic groups                 |  |
| Other – Arab                                    |  |
| Other – Other                                   |  |
| Not Disclosed                                   |  |
| Not Known                                       |  |
| Other (please state)                            |  |

| Religion (please tick one category) |  |
|-------------------------------------|--|
| Buddhist                            |  |
| Christian                           |  |
| Hindu                               |  |
| Jewish                              |  |
| Muslim                              |  |
| Sikh                                |  |
| Other Religion                      |  |
| No Religion                         |  |

| Sex (please tick one) |  |
|-----------------------|--|
| Male                  |  |
| Female                |  |

| Disability (please tick one) |  |
|------------------------------|--|
| Disabled                     |  |
| Not Disabled                 |  |

| Marital Status (please tick one box) |  |
|--------------------------------------|--|
| Married                              |  |
| Single                               |  |
| Divorced                             |  |
| Widowed                              |  |
| Separated                            |  |
| Cohabiting                           |  |

| Sexual Orientation (please tick one box) |  |
|------------------------------------------|--|
| Heterosexual                             |  |
| Lesbian                                  |  |
| Bisexual                                 |  |
| Gay                                      |  |
| Prefer not to say                        |  |

| The term trans is used to describe people whose gender identity is not the same as their sex registered at birth. |  |
|-------------------------------------------------------------------------------------------------------------------|--|
| Do you consider yourself to be trans or have a trans history? (over 16s only)                                     |  |
| No                                                                                                                |  |
| Yes                                                                                                               |  |
| Prefer not to say                                                                                                 |  |

| Asylum Status (please tick where appropriate) |  |
|-----------------------------------------------|--|
| Asylum Seeker                                 |  |
| Refugee                                       |  |