Please type answers to all relevant questions and attach copies of all required documents for the current academic year where indicated by🖹

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| **PART A – TO BE COMPLETED BY THE STUDENT** | | | |
| **Section 1: PERSONAL DETAILS** | | | |
| Title | Mr  Ms  Miss  Mrs  Mx  Other (please specify) | | |
| First name |  | Preferred name |  |
| Surname / family name |  | | |
| Date of birth |  | Student number |  |
| University email address |  | | |

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| **Section 2: COURSE DETAILS** | | | | | | | | |
| Level | Undergraduate  PGCE  Graduate-Entry Medic  Postgraduate | | | | | | | |
| Mode of study | Full time  Part time | | | | | College |  | |
| Weeks spent studying in Oxford this academic year if on a modular course: | | | | | | | | |
| Course title  (including award, e.g. BA History) | | |  | | | | | |
| Faculty/department | | |  | | | | | |
| Start date | |  | | Length of course | | | |  |
| Current year of course | |  | | Expected completion date | | | |  |
| Please tick if you are currently suspended | | | | | | | | |
| If you have had any previous periods of suspension during your course please confirm the dates: | | | | |  | | | |
| **UNDERGRADUATES ONLY** | | | | | | | | |
| Please tick if you are studying a course with extended terms | | | | | | | | |
| Please tick if you are on your year abroad | | | | Is your time abroad unpaid  or paid £       per year | | | | |
| Please tick if you are receiving Erasmus funding for your year abroad | | | | | | | | |

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| **Section 3: DISABILITY** | |
| Under the Equality Act a disability is defined as a physical or mental impairment which has a significant, adverse and long-term effect on the person’s ability to carry out normal day-to-day activities. | |
| Do you consider yourself to have a disability or chronic medical condition? | Yes  No |
| If yes, have you registered with the Disability Advisory Service? | Yes  No |
| Have you applied for Disabled Students’ Allowance (DSA)? | Yes  No |
| Are you applying for financial assistance towards any special equipment/material not covered by DSA? | Yes  No |
| If yes, please specify the costs not covered by DSA🖹 | £       per year |

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| **Section 4A: BANK BALANCES AND SAVINGS** | | | | | | |
| Information provided in this section will be used to determine what funding you had available at the start of this academic year. Please make it clear if any funding currently in your bank account, or that was in your bank  account on 30 September 2018, is also listed in section 4B, to avoid this being double counted. | | | | | | |
| **Primary Bank Account - any award will be paid directly into this account** | | | | | | |
| Name of Bank/Building Society | |  | | | | |
| Name on account | |  | | | | |
| Sort code |  | | | Account number (8 digit) | |  |
| For all other current and savings accounts you hold, please provide both the balance of the account as at **30 September 2018** and the current balance below.  You should supply copies of official bank statements for the last three months for all accounts held in your name. Please also provide a statement showing the balance as of 30 September 2018. These statements must show your name and bank details.  **Please explain any debits or credits over £75 on your statements**. If bank statements are submitted without annotation, these will be returned to you. | | | | | | |
| **Bank Account, e.g. HSBC Savings** | | | **Balance as at 30 September 2018** | | **Current balance** | |
|  | | | £ | | £ | |
|  | | | £ | | £ | |
|  | | | £ | | £ | |
|  | | | £ | | £ | |
| By submitting this application I declare that I have provided statements and/or current balances for all current accounts, savings accounts and other savings vehicles held solely or jointly in my name. I understand that any attempt to deceive the University in any application for financial support, by not declaring all accounts or savings vehicles in my name, will result in my application being referred to the Office of the Proctors and Assessor. | | | | | | |

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| **Section 4B: INCOME** |
| On the following page please provide full details of your confirmed or expected income for the current year and each future academic year of your course.  Totals should be in GBP and you should include all sources of funding, including any funds received towards University and College fees. If your course is longer than four years, please complete another copy of the page for any additional years.  Next to each question that requires documentary evidence you will find the symbol🖹. |
| **Additional comments on income** |
| If you wish to provide any further commentary on your income, please do so here: |

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| **Section 4B: Income** | | | | |
| **Academic year** | **Current year** |  |  |  |
| **2018/2019** | **2019/2020** | **2020/2021** | **2021/2022** |
| **OXFORD SUPPORT** | | | | |
| College award🖹 |  |  |  |  |
| Department award🖹 |  |  |  |  |
| Oxford Bursary (undergraduate)🖹 |  |  |  |  |
| Other🖹(please specify) |  |  |  |  |
| **GOVERNMENT SUPPORT** | | | | |
| Undergraduate maintenance loan🖹 |  |  |  |  |
| Undergraduate maintenance grant🖹 |  |  |  |  |
| Undergraduate tuition fee loan🖹 |  |  |  |  |
| Master’s loan🖹 |  |  |  |  |
| Doctoral loan🖹 |  |  |  |  |
| NHS/Teacher training bursary🖹 |  |  |  |  |
| Child Benefit🖹 |  |  |  |  |
| Childcare Grant🖹 |  |  |  |  |
| Child Tax Credit🖹 |  |  |  |  |
| Universal Credit🖹 |  |  |  |  |
| Parents’ Learning Allowance🖹 |  |  |  |  |
| Working Tax Credit🖹 |  |  |  |  |
| Adult Dependants’ Grant🖹 |  |  |  |  |
| Disabled Students’ Allowance🖹 |  |  |  |  |
| Other🖹(please specify) |  |  |  |  |
| **EXTERNAL SUPPORT** | | | | |
| Research Council award🖹 |  |  |  |  |
| External Scholarship🖹 |  |  |  |  |
| Other🖹  (please specify) |  |  |  |  |
| **INDIVIDUAL CONTRIBUTION** | | | | |
| Professional and Career Development Loan (PCDL) 🖹 |  |  |  |  |
| Savings 🖹 |  |  |  |  |
| Net earnings🖹 |  |  |  |  |
| Family/partner contribution |  |  |  |  |
| Employer contribution🖹 |  |  |  |  |
| Other🖹(please specify) |  |  |  |  |
| **Total** |  |  |  |  |
| If you are an undergraduate with Home fee status, have you been financially assessed in your government support application? If no, please explain why this is the case in Section 6. | | | | Yes  No |

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| **Section 5A: EXPENDITURE** | | | | | | | | | | |
| A standard allowance will be included in our assessment to cover essential expenditure such as food, household costs, personal items and course costs. This is based on the University’s published lower range of living costs for the year. Next to each question that requires documentary evidence you will find the symbol🖹. You only need to provide evidence for those questions that apply to you. Please indicate whether figures are weekly, monthly, termly or annual where requested. | | | | | | | | | | |
| **ACCOMMODATION COSTS** | | | | | | | | | | |
| Do you live | Alone  With your partner/spouse  With your parent(s)/guardian(s) | | | | In private accommodation  In college accommodation | | | | | |
| If you are in shared private accommodation, how many other adults live at this address? | | | | | | | | | |  |
| How many of these adults are not students? | | | | | | | | | |  |
| Do you share all household expenses? | | | | | | | | Yes  No | | |
| Are you a homeowner? | | | | | | | | Yes  No | | |
| Your share of rent/mortgage/college accommodation costs 🖹 £       per: | | | | | | | month  term  year | | | |
| includes utilities  includes meals | | | | | | | | | | |
| Vacation rent, if necessary 🖹 | | | | £       per year | | | | | | |
| Council tax🖹 | | | | £       per month | | | | | | |
| **TRAVEL COSTS** | | | | | | | | | | |
| Home to Oxford | | £       per single trip | Car costs (only if essential) | | | | | | £       per year | |
| **STUDY COSTS** | | | | | | | | | | |
| Field trip costs (only if compulsory) 🖹 | | | | | | £       per single trip | | | | |
| **ADDITIONAL COSTS** | | | | | | | | | | |
| Are you eligible for free NHS dental treatment/prescriptions? | | | | | | Yes  No | | | | |
| If no, specify medical/prescription costs | | | | | | £       per year | | | | |
| If no, specify optician/glasses/contact lenses costs | | | | | | £       per year | | | | |
| If no, specify dental costs | | | | | | £       per year | | | | |

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| **Section 5B: ADDITIONAL NON-STANDARD COSTS** | | | | | |
| **Do you have any children who are financially dependent on you?** | | | Yes  No | | |
| If yes, please give details: 🖹 | Full name | | | Date of birth | |
| **Are any adults financially dependent on you?** | | | Yes  No | | |
| If yes, please give details: | | Full name | | Relationship to you | |
| If you are applying for assistance with non-standard expenses above the University’s estimated lower range living costs, such as those related to dependants or a medical condition, please complete the table below to provide an estimate of your monthly outgoings. This should be completed in addition to the supporting statement in which you should explain why you believe these costs should be taken into account when considering you for an award.  As a guide, the table details the University’s estimated lower range living costs for 2018/19. These figures are based on a single, full-time student with no dependants living in college accommodation (including utility bills). | | | | | |
|  | **University’s lower range (per month)** | | | | **Your estimated costs (per month)** |
| Food | £258 | | | | £ |
| Accommodation (including utilities) | £536 | | | | £ |
| Personal items | £118 | | | | £ |
| Social activities | £41 | | | | £ |
| Study costs | £39 | | | | £ |
| Childcare costs🖹 | NA | | | | £ |
| Other (please specify) | £22 | | | | £ |
|  |  | | | | £ |
|  |  | | | | £ |
|  |  | | | | £ |
|  |  | | | | £ |
|  |  | | | | £ |
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| **Section 6: SUPPORTING STATEMENT** |
| Please explain why you are applying to this fund. You should include the following:   * How you were intending to fund your studies. If your financial situation has changed since your studies began please explain why this could not have been predicted at the start of your course. * What steps you are taking to find alternative funding and how you will fund future years. * Any exceptional expenses, for example essential car costs, a breakdown of childcare costs or costs associated with dependants (please complete the table in section 5b). * A brief justification of the minimum hardship amount you have estimated below. |
|  |
| Please provide an estimate of the minimum amount of hardship funding that you believe you would require for the remainder of the 18/19 academic year:  £ |

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| **Section 7: DECLARATIONS** | | |
| **CONFIDENTIALITY** | | |
| In order for applications to be considered, they will need to be viewed by the staff of Student Fees and Funding, your College and in certain cases the University Hardship Committee. It may also sometimes be necessary for additional supporting information to be sought from other collegiate University staff in order for a decision to be reached. | | |
| **GENERAL DATA PROTECTION REGULATION (GDPR)** | | |
| Oxford University is the data controller for the data you have provided in this form. The University’s Student Fees and Funding department adheres to University policy in matters of data protection (the University's policy on data protection is available at [www.admin.ox.ac.uk/councilsec/compliance/gdpr/universitypolicyondataprotection](http://www.admin.ox.ac.uk/councilsec/compliance/gdpr/universitypolicyondataprotection)). Personal data requested in this form will be used solely in the department for the purposes of your application, statistics and record keeping. We need to process your data for these purposes in order to take steps at your request prior to entering into a contractual relationship with you i.e. to consider your request for funding. If your application is unsuccessful, we will retain the data for as long as we need it to meet the University’s legitimate interests in answering any complaints or queries that may arise in relation to your application, as well as for statistical purposes. The data will not be passed to any other third party without your consent, except when the University is required to do so by law. We will only retain your data for as long as we need it to meet our purposes, including any relating to legal, accounting, or reporting requirements.  Information on your rights in relation to your personal data are available at <https://www1.admin.ox.ac.uk/councilsec/compliance/gdpr/individualrights>. If you wish to raise any queries or concerns about our use of your data, please contact Student Fees and Funding at [student.funding@admin.ox.ac.uk](mailto:student.funding@admin.ox.ac.uk). | | |
| **STUDENT DECLARATION** | | |
| I declare that the information that I have given on this form is correct and complete to the best of my knowledge. I understand that giving false information will automatically disqualify my application and may lead to disciplinary procedures resulting in possible expulsion from the University. I further undertake to repay any loans/grants obtained by me as a result. | | |
| Name: | Signature: | Date: |

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| **SUPPORTING DOCUMENT CHECKLIST**🖹 |
| Please provide copies of documents as originals cannot be returned.  **All students:**  Evidence of any awards provided to you by your college, department or the University  Evidence of any external awards for fees and/or living costs  Evidence of rent/mortgage/college accommodation costs  Evidence of any vacation accommodation costs  Evidence of any Council Tax you are liable to pay  Official Bank/Building Society statements for the last three months and showing the 30 September 2018 balance. Statements should be provided for **all current and savings accounts** and any transactions over £75 should be annotated.  Evidence of any benefits claimed  Evidence of any compulsory field trip costs  A copy of your financial declaration provided to the college  **Undergraduates:**  Your financial notification (Student Finance Breakdown), which clearly shows the level of maintenance funding you are receiving as a loan and the level you are receiving as a grant, where applicable.  **Postgraduates:**  Evidence of fees paid/payment plan  Evidence of net earnings  Your Student Finance Entitlement letter showing the level of Master’s or Doctoral Loan you are receiving  Evidence of any PCDL or other loans  **PGCE students:**  Evidence of any Government Teacher Training Bursary  **Undergraduate Medicine students:**  Evidence of any NHS Bursary  **Students with dependants:**  Evidence of Tax Credits  Evidence of Universal Credit  Evidence of childcare costs  **Students with disabilities:**  Evidence of Disabled Students’ Allowance (DSA) payments/ costs the DSA covers  Evidence of disability costs not covered by DSA |

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| **PART B – TO BE COMPLETED BY THE TUTOR OR SUPERVISOR** | | | | | | | | |
| Students name: | | | | College: | | | | |
| The above named student is applying for financial assistance. We would be grateful for your comments on the student’s academic progress, any departmental/faculty hardship awards provided to them, and any other matters you consider relevant or would like to bring to our attention. | | | | | | | | |
|  | | | | | | | | |
| Please confirm the student’s estimated completion date (month/year): | | | | | | | | |
| For DPhil students only | | Estimated submission date: | | | Estimated Leave to Supplicate date: | | | |
| **TUTOR/SUPERVISOR DECLARATION** | | | | | | | | |
| I certify that the applicant has discussed the application with me. | | | | | | | | |
| Name |  | | Signed | | | |  | |
| Email |  | | | | | Date | |  |

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| **PART C – TO BE COMPLETED BY THE COLLEGE** | | | | | | | | | |
| Students name: | | | College: | | | | | | |
| **SUSPENSION** | | | | | | | | | |
| If this student is currently suspending, please confirm their expected return date: | | | | | |  | | | |
| **FINANCIAL GUARANTEE / DECLARATION** | | | | | | | | | |
| Did the student provide a financial guarantee/financial declaration to the College?  If yes, please ensure that a copy is included with the application. | | | | | | | | | Yes  No |
| **FEES** | | | | | | | | | |
|  | | **2018/19 liability** | | **Amount paid to date** | | | **Date of payment/s** | | |
| **University Fees or Continuation Charges** | | £ | | £ | | |  | | |
| **College Fees or Continuation Charges** | | £ | | £ | | |  | | |
| **COLLEGE HARDSHIP FUNDING** | | | | | | | | | |
| Please give details of any college hardship funding awarded to the student during their course. | | | | | | | | | |
| **Date/Year** | **Amount** | | | | **Grant or Loan** | | | | |
|  | £ | | | |  | | | | |
|  | £ | | | |  | | | | |
|  | £ | | | |  | | | | |
|  | £ | | | |  | | | | |
| Further information: | | | | | | | | | |
| Is the College prepared to assist the student any further during this academic year? | | | | | | | | Yes  No | |
| Further comments: | | | | | | | |  | |

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| **PART C CONTINUED – TO BE COMPLETED BY THE COLLEGE** | | | | | |
| Please explain why this student is applying for financial assistance, including:   * How the student was intending to fund their studies. If their financial situation has changed since their studies began please explain why this could not have been predicted at the start of their course. * What steps the student is taking to find alternative funding and how they will fund future years. * What funding the College is prepared to offer the student from its own hardship fund. * Brief commentary on the student’s estimated minimum level of hardship amount required, as outlined in Part A. * Any other matters you consider relevant. | | | | | |
|  | | | | | |
| **COLLEGE DECLARATION** | | | | | |
| I certify that, to the best of my knowledge, the information given in Part A is a true statement or estimate (as appropriate) of the applicant’s income for the period of their course. The applicant has discussed the application with me. | | | | | |
| Name |  | Signed | |  | |
| Email |  | | Date | |  |
| Please send Parts A, B and C to [student.funding@admin.ox.ac.uk](mailto:student.funding@admin.ox.ac.uk) or to Hardship funds, Student Fees and Funding, 3rd Floor, 4 Worcester Street, Oxford, OX1 2BX as soon as possible and by the relevant deadline (if applicable). An email confirming receipt will be sent to both you and the student. | | | | | |