

# Application for Financial Assistance 2026-2027

## SECTION 1 - LEARNER DETAILS - Please complete in BLOCK CAPITALS

|                           |  |                 |
|---------------------------|--|-----------------|
| Title (Mr, Miss, Mrs, Ms) |  |                 |
| Surname                   |  |                 |
| First Name(s)             |  |                 |
| Home Address              |  |                 |
|                           |  |                 |
| Post Code                 |  |                 |
| Mobile Tel. No.           |  |                 |
| Email Address             |  |                 |
| Date of Birth             |  | Age at 31/08/26 |

Do you have an Education Health & Care Plan (EHCP) Yes ☐ No ☐

**Are you currently 16-18 and: -**

|                                                                                                                                 |     |                          |    |                          |
|---------------------------------------------------------------------------------------------------------------------------------|-----|--------------------------|----|--------------------------|
| a) A Young Parent or Carer                                                                                                      | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| b) In Local Authority Care or a Care Leaver                                                                                     | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| c) An Unaccompanied Asylum Seeker                                                                                               | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| d) In receipt of Universal Credit (U.C.)                                                                                        | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| e) Receiving Disability Living Allowance <b>or</b> Personal Independence Payments <b>and</b> Universal Credit in your own right | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |

**If you have ticked 'YES' to b or c, please provide a letter from your Local Authority. If you have ticked 'YES' to e or f, please ensure you complete section 5b. Learners in receipt of Universal Credit must also provide evidence of either a tenancy agreement or utility bill or if a young parent, a child benefit award or birth certificate for any dependent children.**

## SECTION 2 - TRANSPORT

How will you travel to and from College

|                                   |     |                          |    |                          |
|-----------------------------------|-----|--------------------------|----|--------------------------|
| Public Transport                  | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| Do you have the Go North East App | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| Own Transport                     | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| Walk                              | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| Other (please state)              |     |                          |    |                          |

## SECTION 3 - COURSE DETAILS

|                                                 |                          |                          |                          |                          |
|-------------------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Course Title                                    |                          |                          | Course Level             |                          |
| First Level 3                                   | <input type="checkbox"/> | Second Level 3           | <input type="checkbox"/> |                          |
| Full-Time                                       | <input type="checkbox"/> | Part-Time                | <input type="checkbox"/> | Apprenticeship           |
|                                                 |                          |                          | <input type="checkbox"/> |                          |
| Are you in receipt of an Advanced Learner Loan  | Yes                      | <input type="checkbox"/> | No                       | <input type="checkbox"/> |
| Advanced Learner Loan Customer Reference Number |                          |                          |                          |                          |

#### SECTION 4 - HOUSEHOLD INCOME

Complete this section if you, your co-habiting partner or parent(s)/guardian(s) are working and not in receipt of the benefits listed 2 to 7 in section 5b. If you claim a Universal Credit top up this will be added to income from earnings to calculate your overall household income.

|                                                     |   |
|-----------------------------------------------------|---|
| Applicants' gross annual income                     | £ |
| 1 <sup>st</sup> Parent/Guardian gross annual income | £ |
| 2 <sup>nd</sup> Parent/Guardian gross annual income | £ |
| Partners gross annual income                        | £ |
| Universal Credit Top Up                             | £ |
| Other                                               | £ |
| <b>Total</b>                                        | £ |
| Number of dependent children                        |   |

Please enclose a copy of a P60, week 52 or month 12 payslip from 2025-2026 for all earners in the household. If you claim a Universal Credit top up, you must also provide 3 recent Universal Credit statements as these will be used to calculate overall income.

#### SECTION 5 - HOUSEHOLD BENEFIT

Complete this section if you or your household are not in employment and in receipt of any of the benefits listed in section 5b. If you live with parent(s) or guardian(s) please ask them to complete this section. If you live independently or are financially independent, you must complete this section.

Please note applications cannot be processed without evidence.

If you **live** with or are **financially dependent upon your parent(s)/guardian(s)**, please ask them to complete section **5a and 5b**. If you live independently or are financially independent, complete section **5b** only.

**If you claim benefit in your own right, you will be assessed as financially independent.**

##### Section 5a

|                                       |  |
|---------------------------------------|--|
| Parent(s)/Guardian(s) name(s)         |  |
| Address (if different from section 1) |  |
|                                       |  |
| Post Code                             |  |
| Telephone No.                         |  |
| Email Address                         |  |
| Number of dependent children          |  |

##### Section 5b

Please tick the benefit/s you receive. You must provide evidence which proves current entitlement e.g. Award Notice, Official Benefit Letter or Council Tax Bill. This can be an original document, photograph, scanned copy or screenshot.

**Important: If you are in receipt of Universal Credit (UC) you must supply 3 recent UC statements which show that you do not have income from employment.**

|                                                                 |                          |                                |                          |
|-----------------------------------------------------------------|--------------------------|--------------------------------|--------------------------|
| 1. Universal Credit                                             | <input type="checkbox"/> | 5. Pension Credit (Guaranteed) | <input type="checkbox"/> |
| 2. New Style Job Seekers Allowance                              | <input type="checkbox"/> | 6. Council Tax Benefit         | <input type="checkbox"/> |
| 3. New Style Employment Support Allowance                       | <input type="checkbox"/> | 7. Housing Benefit             | <input type="checkbox"/> |
| 4. Support under part V1 of the Immigration And Immigration Act | <input type="checkbox"/> |                                |                          |

## SECTION 6 - ASSISTANCE REQUIRED

Please tick the support you require to enable you to attend your chosen course of study.

|                                                                     |     |                          |    |                          |
|---------------------------------------------------------------------|-----|--------------------------|----|--------------------------|
| Travel                                                              | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| Meals (biometric consent required – see appendix 1 for information) | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| Course Kit & Equipment                                              | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| Childcare (separate application form required) *                    | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| Field Trips **                                                      | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| UCAS Application Fee**                                              | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| Hardship (for additional kit or support in emergency situations) ** | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |

\* Application forms are available from the Finance Department, or College website.

\*\* Applications must be made via email to [financial.support@derwentside.ac.uk](mailto:financial.support@derwentside.ac.uk)

## SECTION 7 - LEARNER BANK DETAILS

**Awards other than those in-kind are paid by BACS; and so, all learners must have their own bank account**

|                                       |                                                                                                                                                                                                                   |
|---------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Full Name of Account Holder           | <input type="text"/>                                                                                                                                                                                              |
| Bank/Building Society Name and Branch | <input type="text"/>                                                                                                                                                                                              |
| Sort Code                             | <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>                                                                                     |
| Account Number                        | <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>                                           |
| Roll Number (if applicable)           | <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> |

## SECTION 8 - DECLARATION

**Please read the following declaration carefully and sign below.**

- I/we certify that the information/evidence given in this application is true and accurate. If information is found to be false or misleading, I/we may be liable to repay any awards made.
- It is my/our responsibility to inform the Finance Department if any of my/our particulars change or if I withdraw from College. I/we understand that funding will stop, and I/we may be required to repay any awards.
- I/we understand that financial assistance is based upon **eligibility** and **actual need** and is **not guaranteed**.
- I/we understand that any financial assistance given is subject to satisfactory attendance and behaviour.
- Attendance will be monitored and assistance may be withdrawn if levels are below **the College target of 90%**.
- I/we are aware that the College will treat all applications confidentially and record and securely hold any information of a personal or sensitive nature.
- I/we understand that permission will be sought before information is passed to others in College and I/we understand that this will be done on a need-to-know basis only.
- I/we have read and understand the guidelines for the collection of biometric information (see appendix 1) and give consent for this to be used for learner support purposes only.

Signature of Learner  Date

Signature of Parent/Guardian  Date   
(If under 18 years and applicable)

**IMPORTANT:** Please ensure you have completed this form in full and provided the necessary evidence. Any original documents submitted will be returned once your application has been processed. Funding will be approved after enrolment and attendance is confirmed. If your application is unsuccessful or payments withheld, you can appeal in writing at [financial.support@derwentside.ac.uk](mailto:financial.support@derwentside.ac.uk)

Completed forms and evidence can be forwarded to:

Main Reception in College

Email: [financial.support@derwentside.ac.uk](mailto:financial.support@derwentside.ac.uk)

Post: Finance Department, Derwentside College, Front Street, Consett, DH8 5EE

Queries: via email as above or [caroline.swainson@derwentside.ac.uk](mailto:caroline.swainson@derwentside.ac.uk) - telephone 01207 585900, ext. 971

**FOR OFFICE USE ONLY**

**Learner Name**  **Age**  **Learner Number**

|                                                        |     |                      |    |                      |
|--------------------------------------------------------|-----|----------------------|----|----------------------|
| Apprentice                                             | Yes | <input type="text"/> | No | <input type="text"/> |
| 16-18 In receipt of Universal Credit                   | Yes | <input type="text"/> | No | <input type="text"/> |
| 16-18 In receipt of UC or ESA and DLA or PIP           | Yes | <input type="text"/> | No | <input type="text"/> |
| 16-18 In Care or Care Leaver (including Asylum Seeker) | Yes | <input type="text"/> | No | <input type="text"/> |
| A Young Parent/Carer                                   | Yes | <input type="text"/> | No | <input type="text"/> |
| Student/Parent in receipt of benefit                   | Yes | <input type="text"/> | No | <input type="text"/> |
| Student/Parent in receipt of low income                | Yes | <input type="text"/> | No | <input type="text"/> |
| Advanced Learner Loan (A.L.L.)                         | Yes | <input type="text"/> | No | <input type="text"/> |

Application  Approved  Rejected  Amended

**CATEGORIES OF SUPPORT**

|                    |                      |
|--------------------|----------------------|
| Travel             | <input type="text"/> |
| Meals              | <input type="text"/> |
| Kit/Equipment      | <input type="text"/> |
| Childcare          | <input type="text"/> |
| Field Trips        | <input type="text"/> |
| UCAS               | <input type="text"/> |
| Hardship           | <input type="text"/> |
| Vulnerable Bursary | <input type="text"/> |

**AWARDS MADE**

|                            |                      |                      |
|----------------------------|----------------------|----------------------|
| <b>Kit &amp; Equipment</b> | <b>£ Award</b>       | <b>Evidence</b>      |
|                            | <input type="text"/> | <input type="text"/> |
|                            | <input type="text"/> | <input type="text"/> |

|                    |                      |                      |
|--------------------|----------------------|----------------------|
| <b>Field Trips</b> | <b>£ Award</b>       | <b>Evidence</b>      |
|                    | <input type="text"/> | <input type="text"/> |
|                    | <input type="text"/> | <input type="text"/> |

|                 |                      |                      |
|-----------------|----------------------|----------------------|
| <b>Hardship</b> | <b>£ Award</b>       | <b>Evidence</b>      |
|                 | <input type="text"/> | <input type="text"/> |
|                 | <input type="text"/> | <input type="text"/> |

|               |                          |                         |
|---------------|--------------------------|-------------------------|
| <b>Travel</b> | <b>Ticket Authorised</b> | <b>Ticket Cancelled</b> |
|               | <input type="text"/>     | <input type="text"/>    |

|             |                      |
|-------------|----------------------|
| <b>Date</b> | <input type="text"/> |
|-------------|----------------------|

|                   |                      |                      |
|-------------------|----------------------|----------------------|
| <b>Attendance</b> | <b>% Attendance</b>  | <b>Date Checked</b>  |
|                   | <input type="text"/> | <input type="text"/> |
|                   | <input type="text"/> | <input type="text"/> |

**Processed by:**  **Date**

**Learner informed of decision**  **Date**

**Notes:**