Applicant’s Name: ____________________________

This form is for applicants to CAFRE- Enniskillen, Greenmount and Loughry Campuses.
• All information will be treated in the strictest confidence.
• Any person wilfully making a false statement in support of this application will be liable to prosecution.
• If you have any questions about completing this form you should contact Student Finance NI Further Education Section. Details are provided at the back of this form.

Important: Please read these notes before filling in this form:
1. The applicant should complete and sign this form. Guidance on answering the questions is given in bold.
2. Return the completed form to Student Finance NI Further Education Section at the address shown on the back of this form by 30 June 2015. This will enable Student Finance NI Further Education Section staff to make their assessment in time for you to receive any financial support to which you may be entitled at the start of your course. If you complete the form after that date you will still be eligible for support if you meet the criteria but you may not receive payment at the start of your course. You will not be eligible for support for the 2015/2016 year of your course if you apply later than six months after the start of your course.
3. Do not complete this form if you have moved or will be moving to Northern Ireland from the United Kingdom (UK) and Islands for the purpose of attending your course. You should seek advice from the responsible authority in the place where you used to live - Scotland: the Student Awards Agency for Scotland; England and Wales: your Local Education Authority; Channel Islands: the Education Departments of Guernsey or Jersey; Isle of Man: the Education Department.
4. Apart from people at (3) above, if you are a national of a European Union state who has moved or will be moving to Northern Ireland for the purpose of attending your course (including a United Kingdom national who has been living outside the United Kingdom) you should seek advice from Student Finance NI Further Education Section staff. Details are provided at the back of this form.
Section A: Student’s Personal details

1. Surname: __________________________________________________________

2. First name(s): _____________________________________________________

3. Surname at Birth: ___________________________________________________

4. Title: Mr ☐ Mrs ☐ Miss ☐ Ms ☐ Other ☐

(Please tick) (Please write in)

5. Date of Birth: Day __ Month __ Year ____________

Please enclose your original Birth Certificate with your application
(Certified photocopies will only be accepted in exceptional circumstances).

6. Marital Status: Single ☐ Married ☐ Widowed ☐ Divorced ☐

(Separated ☐ Living with partner ☐)

If you are married, divorced or separated, you must include evidence,
eg a copy of marriage certificate or court order.

Name of Student’s Spouse/Co-habitee/Partner (if applicable): ________________________________

Occupation: __________________________________________________________

7. Date of Marriage: Day __ Month __ Year ____________

(If applicable)

Maiden Name: __________________________________________________________

8. Date of Separation/Divorce: Day __ Month __ Year ____________

(If applicable)

9. Sex: Male ☐ Female ☐ (Please tick)

10. Length of residency in Northern Ireland: ________________________________

11. National Insurance Number: ________________________________

- Fill in ALL Sections -
Section B: Residence/Contact details

12. State Permanent Home Address:


Postcode: ___________________ Email: ___________________

Home Tel No: _______________ Mobile: ___________________

13. Parents’ Home Address (If same as your address write ‘AS ABOVE’):


Postcode: ___________________ Tel: ___________________

14. Have you resided at an address other than at question 12 above during the period 1 Sept 2012 to 31 August 2015?

Yes [ ] No [ ] (Please tick)

15. If you have answered Yes at question 14 state addresses and dates:

<table>
<thead>
<tr>
<th>Address</th>
<th>Dates you were there</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

16. Residence during term time:

Parental Home [ ] Halls of Residence [ ] Lodgings [ ]

(Please tick)


Postcode: ___________________ Tel: ___________________

- Fill in ALL Sections -
Section C: Proposed campus and course details

17a. Please list below course(s) applied for at Enniskillen, Greenmount or Loughry Campus:

b. Which campus will you be attending in 2015/16?

c. Give the name of the course you are studying or expect to study in 2015/16.


d. What qualification will you gain on completion of your course?


e. Date you commenced/or will commence your course.

Day  D D  Month  M M  Year  Y Y Y Y

f. When will you complete the last year of your course?

Day  D D  Month  M M  Year  Y Y Y Y

g. What length is the course?  1 year  2 years  3 years  (Please tick)

h. Which year of the course are you studying in 2015/16 (ie, 1st, 2nd, 3rd)?


i. Will you be repeating any part of the course in 2015/16?

Yes  No  (Please tick)

If YES, please give details:

________________________________________________________________________

________________________________________________________________________

- Fill in ALL Sections -
Section D: Details of previous education

18. Give details of colleges/universities attended since leaving school (If applicable):

   Name: ____________________________
   Course: __________________________
   Full or part time: __________________
   Date of Entry: _______________ Date of Leaving: _______________

19. Previous financial support

   Have you received any financial assistance towards attendance on a previous course by this or any other body?

   Yes □ No □ (Please tick)

   If Yes, please give full details: ____________________________________________
   ____________________________________________
   ____________________________________________

   Awarding authority and type of award: ________________________________
   ____________________________________________
   ____________________________________________

   Duration and dates: ____________________________________________

- Fill in ALL Sections -
Section E: Student’s Income

20a. Have you or do you intend to apply for any other Government funding?

Yes ☐ No ☐ (Please tick)

b. If you answered YES to question (a) above you must give details:

As a student can only receive one form of Government support, students who are in receipt of any other Government Award type are not eligible to apply for a Further Education Award. Students applying for a DARD FE Award are not eligible to apply for Educational Maintenance Allowance.

c. Will you have any income during the academic year 1 September 2015 to 31 August 2016?

Yes ☐ No ☐ (Please tick) This does not include part time jobs or weekend work.

If you answered YES to question (c) above, you need to give details of the source of income and how much you expect to receive during the period 1 September 2015 to 31 August 2016.

<table>
<thead>
<tr>
<th>Source of Income</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

- Fill in ALL Sections -
Section F: Category of Student (Independent/dependent)

You are an independent student if you meet one of the following conditions on the first day of your course:

- You have care of a child or children (enclose child’s original long birth certificate); or
- You are aged 25 or over; or
- You have been married or entered into a civil partnership (you need to enclose your original marriage certificate or civil partnership schedule); or
- You have financially supported yourself for 3 years or more outside of full-time education (please enclose proof, eg letter from employer, P60’s, letter from Benefit office or Inland Revenue. We need proof to cover a **FULL 3 YEAR** period; or
- Both your parents are deceased.

In certain other circumstances Student Finance NI Further Education Section may not take a parental contribution into account, for example, where you are irreconcilably estranged from your parents. For further information please contact Student Finance NI Further Education Section or see Section 6.3 of the ‘Guide for those starting Further Education at CAFRE’.

21. Do you wish to be considered as an independent student?

Yes ☐

You and your Spouse/Partner (if applicable) should complete section H.

No ☐

Your Parent(s)/Guardian(s)/Parent’s Partner (if applicable) should complete section H.

- Fill in ALL Sections -
**Section G: Supplementary Grants**

22. **Have you any Dependents?**
   - Yes □
   - No □
   *(Please tick)*

   **If Yes, will you use registered childcare?**
   - Yes □
   - No □
   *(Please tick)*

**Section H: Parental/Spouse/Partner Financial Details**

If parents are divorced or separated, only the parent with whom the student ordinarily resides should complete this section.

Complete either ONE or BOTH boxes to best reflect/apply to your situation.

23. **Name and address of Parents/Step-parents/Parent’s Partner or Civil Partner/Student’s Spouse/Partner/Civil Partner or Guardians.**
   *(If guardian, please enclose a letter of explanation).*

   | Name of Father/Step-father/Mother’s Partner/Guardian/Independent student: | ________________________________ |
|-------------------------------------------------|
| Relationship to applicant: | ________________________________ |
| Address: | ________________________________ |
| | ________________________________ Postcode: ________________________________ |
| Occupation: | ________________________________ |
| Employed □ | Self Employed □ | Unemployed □ | Retired □ |
| *(Please tick the box(es) which apply)* |

| Name of Mother/Step-mother/Father’s Partner/Guardian/Independent student’s partner (if applicable): | ________________________________ |
|-------------------------------------------------|
| Relationship to applicant: | ________________________________ |
| Address: | ________________________________ |
| | ________________________________ Postcode: ________________________________ |
| Occupation: | ________________________________ |
| Employed □ | Self Employed □ | Unemployed □ | Retired □ |
| *(Please tick the box(es) which apply)* |

- **Fill in ALL Sections** -
24. Are your parents: *(Please tick)*

<table>
<thead>
<tr>
<th>Married</th>
<th>Divorced</th>
<th>Widowed and remarried</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Single</th>
<th>Separated</th>
<th>Divorced and remarried</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Widowed</th>
<th>Both deceased</th>
<th>Living with partner/civil partner</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

If your parents are divorced or separated, which parent do you normally live with?

Father [ ]  Mother [ ] *(Please tick)*

If your parents are divorced or separated you must submit evidence, eg a copy of court order.
Section I: Parental/Spouse/Partner Financial Details

**Income**

**NOTE: DO NOT LEAVE ANY BOX BLANK**

Total gross (before tax) income of the student’s Parent(s)/Step-parent/Parent’s Partner or Civil Partner/Guardian FROM ALL SOURCES for the YEAR ENDED 5 APRIL 2014.

WHERE NO INCOME WAS RECEIVED IN RESPECT OF ANY ITEM UNDERMENTIONED YOU MUST ENTER “NONE” or “N/A” (not applicable).

<table>
<thead>
<tr>
<th>Father/ Mother’s partner/ Guardian/ Independent Student</th>
<th>Mother/ Father’s partner/ Guardian/ Independent Student’s/ partner</th>
</tr>
</thead>
<tbody>
<tr>
<td>State total gross income from salary, wages, commission, bonus and overtime, before deductions. Enclose P60’s for 2013/14 tax year.</td>
<td>£</td>
</tr>
<tr>
<td>State amount of taxable benefits (eg car, BUPA)</td>
<td>£</td>
</tr>
<tr>
<td>SELF EMPLOYED - Total income from trade, business or profession. Enclose Tax Calculation for 2013/14 year.</td>
<td>£</td>
</tr>
<tr>
<td>Income from property, land, etc as computed for purposes of Income Tax. (i) Rents and profits from furnished lettings. (ii) Other income from property, ground rents etc.</td>
<td>£</td>
</tr>
<tr>
<td>Pensions - Please state type of pension, eg Retirement, Widows, Work Pension, etc.</td>
<td>£</td>
</tr>
<tr>
<td>Interest on Bank/Building Society Investments (Gross)</td>
<td>£</td>
</tr>
<tr>
<td>Other Unearned Income (Gross).</td>
<td>£</td>
</tr>
</tbody>
</table>
Application for Student Support for people entering Further Education in 2015/16 (including living expenses grant and any supplementary grants).

SOCIAL SECURITY BENEFITS
Please state type of Social Security Benefit, eg Income Support/Jobseekers Allowance, Employment and Support Allowance, Disability Living Allowance, Carers Allowance, etc. *Not all benefits are taken into consideration but you must declare them.*

<table>
<thead>
<tr>
<th>Type of Benefit</th>
<th>Father/Mother's partner/Guardian/Independent Student</th>
<th>Mother/Father's partner/Guardian/Independent Student's/partner</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>£</td>
<td>£</td>
</tr>
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<td></td>
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<td>£</td>
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<tr>
<td></td>
<td>£</td>
<td>£</td>
</tr>
</tbody>
</table>

26. Charges on deductions and allowances against income in accordance with Income Tax Practice for the **YEAR ENDED 5 APRIL 2014 - CERTIFICATES MUST BE PRODUCED.**

<table>
<thead>
<tr>
<th>Type of Allowance</th>
<th>Father/Mother's partner/Guardian/Independent Student</th>
<th>Mother/Father's partner/Guardian/Independent Student's/partner</th>
</tr>
</thead>
<tbody>
<tr>
<td>Superannuation contributions (voluntary and/or compulsory).</td>
<td>£</td>
<td>£</td>
</tr>
<tr>
<td>Retirement Annuity premiums/Private Pensions.</td>
<td>£</td>
<td>£</td>
</tr>
<tr>
<td>Other Allowances (please state type and amount).</td>
<td>£</td>
<td>£</td>
</tr>
</tbody>
</table>

- Fill in ALL Sections -
Application for Student Support for people entering Further Education in 2015/16 (including living expenses grant and any supplementary grants).

Section J: Children in the household

27. Give details of children who are dependent on the Parent(s)/Guardian(s) during the academic year 2015/16 (Do not include applicant).

<table>
<thead>
<tr>
<th>Name</th>
<th>Date of Birth</th>
<th>School or College they will attend during the 2015/16 school year</th>
</tr>
</thead>
<tbody>
<tr>
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</tr>
</tbody>
</table>

The information provided on this form may be made available to other departments/agencies for the purposes of preventing or detecting crime.

Section K: Student’s Bank Details

28. Account details

Give the details of the bank account into which you want to receive your payments. **This account must be in your own name.** Please note that missing or incorrect bank details will result in your Grant payments being delayed.

**Post Office Accounts are not acceptable.**

Sort Code:  

Account Number:  

- Fill in ALL Sections -
Section L: Declarations

All applicants: please read the following declaration. Your application for support will not be processed if you do not sign and date the declarations. Before signing and returning your completed form, you should read the Data Protection statement on the last page.

Parents/Partners/Guardians

I/we declare that the statements made on this form are to my/our knowledge and belief correct. I/we undertake to supply any additional information or documentary evidence which may be required to verify the particulars given. I/we undertake that where any provisional or other payments made in pursuance of the award in respect of the year exceed (for whatever reason) the student support in respect of the year, I/we will, if called upon to do so, repay the excess amount.

Signed: Father/Mother's partner/Guardian

__________________________________________ Date: D D M M Y Y Y Y

Signed: Mother/ Father's partner/Guardian

__________________________________________ Date: D D M M Y Y Y Y

Student:

To the best of my knowledge the information I have given on this form is complete and accurate. I will inform Student Finance NI's Further Education Section immediately of any change in my circumstances at any time that might affect my entitlement to support. I understand that if I give false information, or fail to give complete information, I may be prosecuted.

I understand that the information provided on this form may be made available to other departments/agencies for the purposes of detecting crime.

I will write and tell you immediately if, in any year of my course, I am absent due to illness for more than 60 days from the course, or if I am absent for other reasons, or if I leave the course. I understand that if this happens I may not be eligible to receive any outstanding instalments notified to me, and that I may have to repay all or part of any financial support paid to me for that year.

Section L - Continued on next page
If financial assistance is provided to me and is, for whatever reason, an amount, which is more than I am entitled to, I will pay back any amount in excess of my entitlement.

Please check that you have answered every relevant question in full and enclosed any documents you have been asked to supply.

Signed: Student

_________________________________________ Date: ____________

Signed: Parent/Guardian (if applicant is under 18 years of age)

_________________________________________ Date: ____________
CHECKLIST, have you:

☐ Enclosed your original birth certificate, marriage certificate or other relevant documents;

☐ Enclosed proof of independence (if applicable);

☐ Completed all the relevant questions;

☐ Signed and dated the declaration at the end of this form.

Completed ALL sections

If you have not done the above your form will be returned which will delay the processing of your application.

Completed forms along with your birth certificate and any other documents should be returned as soon as possible to:

Student Finance NI
Further Education Awards Section
Western Education and Library Board
1 Hospital Road
Omagh
Co Tyrone
BT79 0AW

PROOF OF POSTAGE IS NOT PROOF OF RECEIPT.
If you do not receive an acknowledgement of your application within 2 weeks of posting, please contact Student Finance NI on 028 8225 4546.

PHOTOCOPIES WILL NOT BE ACCEPTED.
It is the responsibility of the student to ensure their application form has been received by Student Finance NI by the closing date.

- Fill in ALL Sections -
Data Protection Act 1998

The information obtained from your application form is processed in accordance with the Data Protection Act 1998.

The information which you, your husband, wife, partner or relatives give on this form ("your personal information") will be used to process your further education award application. The Department of Agriculture and Rural Development, (DARD) has made a Service Level Agreement with the Western Education & Library Board (WELB) relating to student finance applications.

WELB will need the information provided in connection with your application to determine whether you are eligible for student finance and to assess the maximum amount of financial support you are entitled to. WELB is the data controller for that information. WELB will need to keep personal information about you, your partner and your relatives so that it can audit its assessment of financial support. If you would like to see your information please contact WELB.

DARD will receive information from WELB so that they can confirm the details of your course of study. DARD may also ask for information that is derived from your application (for example, to verify if you are eligible for a hardship payment).

By law, your WELB and CAFRE must protect the public funds they handle and may use the information you have provided on this form to prevent and detect fraud.

NB This document contains reference to the Western Education Library Board (WELB). From 01 April 2015, the five Education and Library Boards (ELBs) will be replaced by a single organisation, the Education Authority (EA), which will assume the responsibilities of the ELBs.