PFF1/CAFRE

EDUCATION AUTHORITY

FURTHER EDUCATION FULL TIME GRANTS

FINANCIAL CIRCUMSTANCES 2026-2027

Who should complete this form?

Complete this form if you are:

- The student's natural or adoptive parent(s).
- The student's step-parent.
- The husband, wife, civil partner or cohabiting partner of one of the student's parents.
- The student's husband, wife or civil partner.
- The student's partner, if the student is over 25 and you live with them as though you are married or in a civil partnership.

What details do I need to provide?

You need to tell us some personal details and details of your income.

Section 1

Student details

Title	
Forename(s)	
Surname	
Date of Birth	D D M M Y E A R
Name of College student will attend	

Department of Agriculture, Environment and Rural Affairs
www.daera-ni.gov.uk

An Roinn Talmhaíochta, Comhshaoil agus Gnóthaí Tuaithe

Depairtment o' Fairmin, Environment an' Kintra Matthers

Section 2

Your Personal Details

Person 1

Title

Forename(s)

Surname

Relationship to the student

Sex: ☐ Male ☐ Female

☐ Single

☐ Married/Civil partnership

☐ Divorced/dissolved civil partnership

☐ Living with partner

☐ Separated

☐ Widowed/surviving civil partner

Home address

Home telephone number/mobile number

Email address

Person 2

Title

Forename(s)

Surname

Relationship to the student

Sex: ☐ Male ☐ Female

☐ Single

☐ Married/Civil partnership

☐ Divorced/dissolved civil partnership

☐ Living with partner

☐ Separated

☐ Widowed/surviving civil partner

Home address

Home telephone number/mobile number

Email address

Section 3

Household Income

- Please give details of income received during the year ended 5 April 2025.
- Answer 'YES' or 'NO' to every question, if you answer 'YES' please provide the income amount.
- Where you tell us an amount, you must provide evidence to support it.
- If you answer 'NO' to a question, this means you are telling us you **did not** receive an income from that particular income type.

	Person 1	Person 2
Q1 Are you in receipt of Income Support, Income Related Employment and Support Allowance, Jobseeker's Allowance or Pension Credits, DLA or PIP? *Enclose evidence for year ended 5 April 2025.*	Yes ☐ No ☐	Yes ☐ No ☐
Q2 Are you in receipt of Universal Credit? *Enclose Universal Credit notification for year ended 5 April 2025.*	Yes ☐ No ☐	Yes ☐ No ☐
Q3 Do you receive tax credits? *Enclose tax credit notification for year ended 5 April 2025.*	Yes ☐ No ☐	Yes ☐ No ☐

State your annual gross income for the year ended 5 April 2025 in the boxes below, from salary, wages, commission, bonus and overtime, before deductions.

Q4 Do you receive a salary or wage? *Enclose P60's for 2024/25 tax year.*	Yes ☐ No ☐	Yes ☐ No ☐
	£	£
Q5 Do you receive taxable benefits *(eg car, BUPA) enclose P11D.*	Yes ☐ No ☐	Yes ☐ No ☐
	£	£

Continued next page

Household Income *(continued)*

	Person 1	Person 2
Q6 Are you self-employed? *Give details for year ended 5 April 2025* *Enclose your tax calculation / accountant's letter.*	Yes ☐ No ☐	Yes ☐ No ☐
Tick the relevant box(es).		
☐ Income from Business/Trade	£	£
☐ Income from Property/Rental	£	£
Q7 Do you currently receive any taxable social security benefits? *Enclose evidence for year ended 5 April 2025.*	Yes ☐ No ☐	Yes ☐ No ☐
Tick the relevant box(es) to confirm source of income.		
☐ Carers Allowance	£	£
☐ Incapacity	£	£
☐ ESA Contribution Based	£	£
☐ Widows/Widowed Allowance	£	£
Q8 Do you currently receive any pensions? *Enclose evidence for year ended 5 April 2025.*	Yes ☐ No ☐	Yes ☐ No ☐
Tick the relevant box(es) to confirm source of income.		
☐ State Retirement Pension	£	£
☐ Occupational Pension	£	£
☐ Industrial Death Benefit Pension	£	£
☐ Other	£	£
Q9 Do you receive any other taxable income? *Enclose evidence for year ended 5 April 2025.*	Yes ☐ No ☐	Yes ☐ No ☐
Tick the relevant box(es) to confirm source of income.		
☐ Bank/Building Society Interest	£	£
☐ Dividends/Investments	£	£
☐ Other	£	£

	Person 1	Person 2
10 Do you have charges on deductions and allowances against income in accordance with Income Tax Practice? *Enclose evidence for year ended 5 April 2025. Certificates must be produced*	Yes ☐ No ☐	Yes ☐ No ☐
Tick the relevant box(es) to confirm charges..		
☐ Superannuation contributions (voluntary and/or compulsory)	£	£
☐ Retirement Annuity premiums/Private Pensions	£	£
☐ Other Allowances (please state type and amount).	£	£

Section 4

Children in the household - dependent student

Give details of children who are dependent on the Parent / Guardian during academic year 2026/27 (Do not include applicant).

Name	Date of Birth DD/MM/YY	School or College they will attend during 2026/27 school year

Section 5

To be completed if income details relate to parents

Declaration for parent/guardian

- I confirm that to the best of my knowledge and belief, the information I have provided is true and complete. If it is not I understand I might be prosecuted and financial support withdrawn from the student.
- I agree to supply any further information or documentary support in relation to the student's application for financial support that the Education Authority may ask for and agree to tell them immediately if my circumstances change in any way that might affect this application for financial support.
- I undertake that where any provisional or other payments made in pursuance of the Grant in respect of the year exceed (for whatever reason) the student support in respect of the year, I will, if called upon to do so, repay the excess amount.

Signature of student's parent/guardian 1

Signature of student's parent/guardian 2

Date: D D M M Y E A R

Date: D D M M Y E A R

Section 6

To be completed if income details relate to spouse or partner of student

Declaration for student's spouse/partner (if applicable)

- I confirm that to the best of my knowledge and belief, the information I have provided is true and complete. If it is not I understand I might be prosecuted and financial support withdrawn from the student.
- I agree to supply any further information or documentary support in relation to the student's application for financial support that the Education Authority may ask for and agree to tell them immediately if my circumstances change in any way that might affect this application for financial support.
- I undertake that where any provisional or other payments made in pursuance of the Grant in respect of the year exceed (for whatever reason) the student support in respect of the year, I will, if called upon to do so, repay the excess amount.

Signature of student's spouse/partner

Date: D D M M Y E A R

Privacy Notice

The Education Authority (EA) and the Department of Agriculture, Environment and Rural Affairs are joint Data Controllers under the Data Protection Legislation. We hold information for the purposes specified in our notification to the Information Commissioner including determining eligibility for a Further Education grant, assessing the maximum amount of financial support available, payment of a Further Education grant and the detection and prevention of fraud, and may use this information for any of these.

For further details about the way your information is used, who is responsible for it and the rights you have in connection with it, please refer to our full Privacy Notice available at:

https://www.eani.org.uk/about-us/privacy/privacy-notices/privacy-notice-education-authority-further-education-grants

If you don't have internet access, please call us on 028 9047 0155, choose Option 2 and we can send a copy to you.

Please return completed form to:
Education Authority
Further Education Section
1 Hospital Road
Omagh
Co Tyrone BT79 0AW

OR

You can bring the application to any of the following EA offices:

Armagh - 3 Charlemont Place, The Mall, Armagh, BT61 9AX
Ballymena - Ballee Centre, Ballee Road West, Ballymena, BT42 2HS
Belfast - 40 Academy Street, Belfast, BT1 2NQ
Dundonald - Grahamsbridge Road, Dundonald, Belfast, BT16 2HS