

Social Work Bursary: Academic Year 2016/17

Application notes for students on postgraduate courses

Completing the application

Part 1 – Your details

Please complete this section in BLOCK CAPITALS (including your email address) and tick all boxes appropriate to your status. This will help us hold the correct details for you and contact you if we need to.

The names you use here need to match the names you give to your university/college when you register.

Please provide details of all higher education qualifications you hold.

Part 2 – About your course

Please give us the exact name and level of the course you are studying.

You will not be eligible for the bursary if you are on an employment based course. These are generally when your studies are being supported by your employer, including direct Open University courses. If you are unsure of the name, level or type of course you are studying, please ask your university/college.

If you are repeating any modules of your course please tell us as we may need to contact you and/or your university/college regarding this.

Part 3 – Payment method

If you are a new bursary applicant, or you have applied for a bursary to us before and you wish to change your bank details, please provide the details of your account in part 3. Otherwise go to part 4.

Part 4 – Residency details

You must satisfy the residency criteria to be eligible for a Social Work Bursary.

Please send original passports, residency permits, Home Office documents etc as we cannot accept photocopies or scanned images. You must also tell us if you have lived outside of England during the last three years leading up to the start of the first day of your course. This includes living in Wales, Scotland or Northern Ireland.

The full residency criteria can be found on our website at: www.nhsbsa.nhs.uk/swb

Part 5 – Other grants, bursaries, retainers or support

Please tell us about any other funding you have applied for or will be receiving while studying.

Please note: This does not include the Maintenance Grant which is linked to the social work bursary; we will ask you about this in part 7.

Part 6 – Your employment details

If you are currently working in the social care sector, please tick 'Yes' and ask your employer to complete section 6.2.

If you begin working in the social care sector after the start of your academic year, you must download and complete this part of the application form again ensuring it is signed by your employer and send it to us without delay.

Please ensure you post the original form to us as we cannot accept photocopies, faxed or scanned copies of the form.

Part 7 - Applying for the Maintenance Grant

The Maintenance Grant is means tested and takes into account your unearned net income for the 2016/17 academic year and, if you have one, your partner's gross residual taxable income for the 2014/15 tax year – see part 8.

Please see the 'Assessed Elements Table' on page 6 which provides more information on what income we use and the period it must cover.

You do not need to tell us about any paid employment in this section but we do need to know about other income such as taxable benefits, pensions, interest from investments or money earned from rent/lettings.

Hint:

You do not need to tell us about any non-taxable benefits that you are receiving (such as Child or Working Tax Credit, Child Benefit and Disability Living Allowance). If you are unsure if the benefits you receive are taxable, please ask the office that deals with your claim.

If you receive income from any property you let, please provide evidence of the amount of rent received over the academic year and then provide evidence of charges you pay relating to the property.

Please note: Your third instalment of bursary may be kept on hold until we verify your unearned income and we are aware this may not be available until the end of your academic year. We will notify you of what evidence is required so you can send it to us as soon as it becomes available.

Part 8 – Partner's finances (if you have one)

The Maintenance Grant is means tested and takes into account your partner's gross residual taxable income for the 2014/15 tax year, if you have one.

Please see the 'Assessed Elements Table' on page 6 which provides more information on what income we use and the period it must cover.

Part 8 Please tell us your status (single, or married/civil partnership/cohabiting).
If you do not have a partner, please indicate this by ticking 'single' box at the top of page 17. Then go to section 9 on page 21.

Section 8.1 Your partner must provide their details.

Section 8.2 Your partner must provide details of all taxable income received for the 2014/15 tax year.

You will need to send evidence of all of your partner's taxable income for the 2014/15 tax year such as P60s, final payslip received for the 2014/15 tax year, self employed accounts for 2014/15 tax year and DWP taxable benefit statement for the 2014/15 tax year.

Tick the relevant box to indicate what evidence you are sending in.

Section 8.3 Your partner must provide details and supply evidence of all additional deductions made from their income.

Section 8.4 Your partner must provide details of all dependants they support, other than yourself.

Section 8.5 Your partner must read the declaration and if satisfied with the information provided it must be signed and dated. If the declaration is not signed and dated, we will not process this section of the form and it will be returned to you.

Please note: If your partner pays into a company pension this will not show on the P60 therefore please also provide their final payslip received in the 2014/15 tax year. If your partner's pension contributions are not shown on their payslip, please also send in a letter from the pension provider stating the amount paid in the 2014/15 tax year.

If your partner has childcare vouchers or other deductions made from their gross earnings (before tax) we will need to see all payslips received for the 2014/15 tax year.

Please remember, all evidence must be original documentation as we cannot accept photocopies.

Part 9 – Allowances for dependants

If you are applying for Adult Dependants Allowance for someone who isn't your partner, we need to see evidence of their net income for the 2016/17 academic year. If you are applying for Parents' Learning Allowance or Childcare Allowance we need to see evidence of your partner's and/or children's net income for the 2014/15 tax year.

Please see the 'Assessed Elements Table' on page 5 which details what income we need and for what period it must cover.

Section 9.1

Do you have an adult who is wholly or mainly financially dependent on you (as you may be able to claim Adult Dependants Allowance)? The adult dependant cannot be your child but can be your partner or another adult you support.

If YES, you will need to give us the dependant's name, tell us whether they are a student and what relation they are to you:

- If they are your partner, you will need to provide evidence of their net income figure for the 2014/15 tax year, such as earnings after Income Tax, National Insurance and pension contributions, state benefits and pensions, net self employed earnings.
- If they are not your partner, you can only claim this grant if they will have an income of no more than £3796 in the 2016/17 academic year. We will need to see evidence of this at the end of the academic year.

Section 9.2

Do you wish to claim Childcare Allowance (we cannot pay you Childcare Allowance if you are receiving the childcare element of Working Tax Credit, Tax Free Childcare or the childcare costs element of Universal Credit)?

If YES, you will need to download and complete the *Childcare Allowance application form* from our website. We will also need you to complete the section titled 'Details of children and young people' with the details of the dependants you are applying for and provide evidence of their net income for the 2014/15 tax year (such as maintenance payments).

Section 9.3

Do you have dependent children (as you may be able to claim Parents' Learning Allowance)?

Section 9.4

If you wish to claim Parents' Learning Allowance you will need provide evidence that the children live with you. For each child we need to see original evidence in the form of a birth certificate, a valid or the most current passport, or a Child Benefit or Child Tax Credit award notification which names the child(ren) on it. If you have a partner, please provide evidence of their net income for the 2014/15 tax year. This can include, earnings after Income Tax, National Insurance and pension contributions, net self employed earnings, or state benefits and pensions.

We will also need you to complete the 'Details of children and young people' section with the details of the dependants you are applying for and provide evidence of their net income for the 2014/15 tax year (such as maintenance payments).

Please note: The original evidence for your maintenance payments can be in the form of a current Child Support Agency letter, maintenance court order or a signed letter confirming how much the voluntary maintenance is (this letter must be from the person paying the maintenance payment).

Your third instalment of bursary may be kept on hold until we verify all the income that was stated in part 9 of the application. You must provide evidence such as P60s, payslips, taxable benefits and maintenance payments for children for the 2015/16 tax year.

Please remember, all evidence must be original documentation as we cannot accept photocopies.

Assessed Elements Table

Please see the table below for the period we use when calculating the means tested element of the bursary.

	Student's income	Spouse/partner/ civil partner's income	Child's income	Adult dependant's income
Maintenance Grant	Net unearned income for the 2016/17 academic year	Residual taxable income for 2014/15 tax year	Not taken into account	Not taken into account
Adult Dependants Allowance	Not taken into account	Net income for 2014/15 tax year	Not taken into account	Net income for the 2016/17 academic year
Childcare Allowance/ Parents Learning Allowance	Not taken into account	Net income for 2014/15 tax year	Net income for 2014/15 tax year	Not taken into account

Academic year - the period to be used for the students' unearned income is the academic year. Therefore for Autumn starters this is 1 September - 31 August and for Winter starters this is 1 January - 31 December.

Unearned income - any taxable income not derived from earnings (from an employer or self employed).

Residual taxable income - before tax and National Insurance but after pension contributions and allowable expense deductions.

Net Income - after tax, National Insurance, pension contributions and allowable expense deductions.

Part 10 – Additional information

Use this space to give us any additional information you feel is relevant to your application such as:

- If your partner has had gaps in any employment, please tell us about that here.
- If you are repeating or have changed your course, please provide as much information as you can about this.

Part 11 – Data Protection

We will treat all information you provide in line with the Data Protection Act 1998.

You can nominate one person to speak to us on your behalf; we call this 'third party authorisation'. If you would like to nominate someone please provide their first and last name, full date of birth and tell us the relationship between this person and yourself.

We use this information as security questions so please ensure these are completed correctly.

Part 12 – Applicant's declaration

Please ensure you read and understand the declaration as it provides important information regarding what to do if you stop your studies for any reason.

Once you have read the declaration and you are happy with all the information you have supplied, please complete your name and then sign and date the declaration.

We cannot accept photocopies of the declaration page.

Part 13 – Posting your application to Social Work Bursaries

Please list all original documents which you are sending with your application.

You should send any valuable documents to us through a secure postal method such as Special Delivery.

You should enclose a self-addressed, pre-paid Special Delivery envelope for the return of your documents. This will allow you to track the return of your documents once they leave us. If you do not send a pre-paid Special Delivery envelope, your documents will be returned to you by standard second class post.

If you are sending your application by Special Delivery, please make a note of your Special Delivery reference number.

Please send your application to:

Social Work Bursaries
PO Box 141
Hesketh House
200-220 Broadway
Fleetwood
FY7 9AS

Social Work Bursary: Academic Year 2016/17

Application notes for students on postgraduate courses

Important note: All eligible students will be entitled to a Placement Travel Allowance (PTA) of £862.50 (this amount will be paid pro-rata if you are a part-time student). In addition you may also be eligible for a bursary if you are nominated for funding by your university/college.

1. Your details

1.1 About you

Are you currently receiving or have you ever received a bursary (in full or part) from the NHS Business Services Authority (NHSBSA), General Social Care Council (GSCC) or the Central Council for Education and Training in Social Work (CCETSW)?

No Yes Give your bursary reference number

(Your bursary reference number begins with a '2' or '3'. Please leave blank if unknown.)

The names you use here need to match the names you give to your university/college when you register.

Title Mr Mrs Ms Miss Other

Surname or family name

First name

Other names

Previous names

Date of birth

Address

Mobile phone number

Alternative phone number

Email

Marital status Single Separated Widowed Divorced

Cohabiting Married Civil partnership

Date of marriage/registration of civil partnership

1.2 Qualifications

Do you have any degrees, diplomas or other qualifications at higher education level?

No Yes *Give details below*

Do not include your A Level qualifications.

Name of qualification	Subject	Date awarded	University/college

2. About your course

2.1 Course details

Full name of social work course

If you are unsure, check with your university/college admissions department.

Is the course employment based or college based?

College based Employment based

Placements are an essential component of your study and do not necessarily mean you are on an employment based course (which is generally when your studies are being supported by your employer, including direct Open University courses).

If you are unsure about what type of course you are studying, please ask your university/college.

Type of qualification you will gain

MA MSc Other Give details

2.2 Details of where you will be or are studying

Name of your university/college

Town/city

2.3 Study details

Date you intend to start or first started your course

When do you expect to complete your course?

Year of course you are studying in the academic year 2016/17

1st year

2nd year

Other Give details

2.4 Repeat study

Will you need to complete any social work modules from a previous year in the academic year 2016/17?

No Go to part 3

Don't know Inform us in writing of details when you know – go to part 3

Yes Go to part 3 - we may need to contact you or your university/college about this

3. Payment method

All payments are made by Banks Automated Clearing System (BACS). You must provide your account details by completing the BACS form below. We will not make payments to an account that is not in your name.

The account must be in the UK, be able to accept payments by direct credit and be in the name of the bursary applicant. If you are unsure of these details, please check with your bank or building society.

We are unable to pay the bursary into prepaid card accounts.

Payment by BACS means you receive your money faster, provided that you supply the correct information. Please take the time to complete this section carefully and write clearly, otherwise it may delay or prevent payments.

3.1 The account we pay your bursary to

If you are a new bursary applicant, or if you are an existing applicant who would like to change their bank account details, please provide details of these below. Otherwise, go to part 4 of this form.

If you are unsure about any of these details, check with your bank or building society. If you miss out any details, your payments may be delayed.

Name account held in
This must be in your name

Account details
Bank/building society name

Branch address

Bank/building society sort code

 - -

Account number

Roll or reference number

Building society accounts only

This is not your credit or debit card number and may include symbols and letters.

4. Residency details

Read part 4 in the instruction notes before completing this section.

4.1 The social work bursary in 2015/16

Did you receive a social work bursary in the academic year 2015/16?

No please complete the sections below

Yes Go to part 5 of this form

4.2 Personal Eligibility - to be completed by all students

To be eligible for a Social Work Bursary, all students, regardless of nationality, must meet certain residence rules. **Please answer the following questions in order for us to determine your eligibility.**

This form will be returned to you if you do not complete each section.

Are you a:

UK national non-UK EU/EEA/Swiss national non-UK, non-EU/EEA/Swiss national

Country of residence - Please give below details of where you have lived for the whole of the 3 years preceding the first academic year of your course.

If you have lived in the UK, you must state which UK country this was i.e. England, Scotland, Wales or Northern Ireland.

Country	Reason	From	To

UK further/higher education history

Please provide details of any further or higher education courses you have undertaken in the UK.

Name of college	Name of course	Full or part time	From	To

UK employment history

Name of employer	Employer's address	Full or part time	From	To

Please answer the questions below if you have been absent from the United Kingdom, the Channel Islands or the Isle of Man because either you, your parent/s or a spouse, civil partner or partner has been employed abroad in the three years preceding your course.

If this does NOT apply to you go to section 4.3.

Name of the person in employment abroad

What is their relationship to you?

The nature of the work

The period(s) spent working abroad

Country	From	To

The nature of the contract.

Please provide as much information as possible including: the period of the contract(s), whether the contract includes liability for UK tax, whether the contract is renewable and whether the contract conveys an automatic right to return to the UK.

Have you maintained a home in the UK? Yes No

Reason	From	To

Further information:

4.3 Non-British citizens

If you are **not** a British citizen please complete this section and give details of your immigration status. We will require supporting documentation concerning your immigration status, including your passport, any letters from UK Visas and Immigration at the Home Office and, if you are an EU National, your National Identity Card.

If you are currently living in the UK and Islands because you are accompanying your parents, spouse or civil partner, please give details of their immigration status and provide their passport, visa or National Identity card.

If you are living in the UK as an EEA or Swiss national, or a family member of an EEA or Swiss national, you must give details below and provide relevant proof that the EEA or Swiss national is exercising their Treaty Rights in the UK i.e. a worker, self-employed, registered as a job-seeker. If you are an EU national or relevant family member, who has been ordinarily resident in the UK throughout the three years preceding the start of the course, please provide evidence of your ordinary residence throughout this period. This can be tenancy agreements, council tax bills, utility bills, government letters, benefit letters etc.

If none of the above apply to you go to part 5.

Date of your first arrival in the United Kingdom

Reason for coming to the United Kingdom

Name of parent, step-parent, spouse or civil partner

What is your relationship to this person?

Do you reside with your parents, step-parents, spouse or civil partner? Yes No

Immigration status	Student	Parent/ step parent	Spouse/ civil partner	Date of application	Date granted	Expiry date
EU National	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	N/A	N/A	N/A
EEA/Swiss National	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	N/A	N/A	N/A
Asylum seeker	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		N/A	N/A
Refugee	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Indefinite leave to remain	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			N/A
Humanitarian protection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Student Visa	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Limited leave	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Discretionary leave	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			

5. Other grants, bursaries, retainers or support

Have you applied for or are you receiving any other grant, bursary, retainer or support as well as the Social Work Bursary?

No

Yes Give details. If you need more space, use part 10 of this application form.

Name of organisation you have applied to/are receiving funding from

Name of the grant, bursary, retainer or other support

If you are applying for or receiving a retainer, you must complete a bursary retainer declaration. Download a copy from our website at: www.nhsbsa.nhs.uk/students/986.aspx and send it with your application.

Dates of support

From

to

If you apply for or receive ANY other grant, bursary, retainer or support after you submit your application, you must inform us in writing.

Career development loans do not affect your application for a bursary, but if we confirm your entitlement to a bursary, you are obliged to let your loan provider know.

6. Employment details

6.1 Will you be employed in the social care sector during your course?

If you are receiving a retainer only, you must complete a bursary retainer declaration. Download a copy from our website at: www.nhsbsa.nhs.uk/Students/986.aspx and send it with your application.

No Go to part 7

Yes You must ask your line manager to complete the following declaration

6.2 Social care employer's declaration – to be completed by your employer

Note to employers

By completing this section you are confirming that the bursary applicant is your employee and is not receiving any of the following:

- sponsorship/support
- any paid time off to allow them to attend studies
- all or part of their tuition fees
- any practice learning opportunity with pay or any other financial support
- any other form of support in order to assist with their social work training

The person who completes this declaration must be the applicant's line manager.

If you have any questions please contact us on 0300 330 1342.

Name of manager

Manager's job title

About the applicant's social care employer

Name of social care employer

Address

Contact phone number

About the employee

Employee's name

Employee's job title

Declaration

- I declare that I am the line manager of the applicant named above and that the applicant is not receiving any support from the social care organisation shown above.
- I understand that if I give the NHSBSA false, misleading or incomplete information, the applicant named above may be refused financial support or any current financial support may be withdrawn resulting in an overpayment for the applicant and I may be prosecuted.
- I agree to be contacted by the NHSBSA so they can verify the employment status and any support arrangements of the applicant named above.

Signature

Date

7. Your unearned income for the academic year 2016/17

Do you want to apply for the maintenance grant in addition to the basic grant? (please refer to page 2 of the application instructions)

No Go to part 8

Yes

Give details of the net unearned income (after Income Tax deductions and National Insurance contributions) you expect to receive during the academic year 2016/17. We will use this information to help us to work out the level of support you are eligible for.

- Complete every box.
- If a question does not apply to you, write 'None' in the answer space.
- If you do not know the exact amount, make an estimate and write 'Estimated' next to the amount.
- Please send original evidence of unearned income of £1,000 or more. We may ask for evidence of any other amounts at a later date. Refer to the list, below, for details of evidence we will accept.

Acceptable evidence for part 7 (all evidence submitted must be original):

- accountant's letter
- tax self assessment form
- benefits letter/statement
- bank or building society statements of interest earned
- dividend statements
- pension statements
- NHSBSA confirmation of benefits
- Child Support Agency letter
- maintenance court order
- confirmation of voluntary maintenance letter

Description of unearned income	Amount during the 2016/17 academic year
Net profit from property, lettings or rent	£
Income from trusts	£
Income from taxable pensions due to incapacity or disability	£
Income from other taxable pensions	£
Income from benefits	
List the type of benefit and give the amount expected - please see part 7 of notes for more information	
	£
	£
	£
Send a copy of the court order or other evidence	
Maintenance payments for you, including voluntary maintenance	£
Maintenance payments for your children, including voluntary maintenance	£
Other unearned income	
List the type of unearned income, such as building society interest, investments or sponsorship, and give the amount expected	
	£
	£
	£
Total unearned income - Add up all the unearned income you have listed	£

8. Partner's finances

- This section collects information about people whose finances we consider are related to yours for the purposes of awarding you a bursary.
- We will use the information to help us to calculate how much of the means tested grant you are entitled to.
- The table tells you who should complete this section.
- Please tick the box that describes your status and ask the relevant person or people to complete the rest of part 8.

Your status	Who should complete part 8
<input type="checkbox"/> Single	You do not need to complete part 8. Go to part 9.
<input type="checkbox"/> Married/civil partnership/cohabiting	Your partner

If you have a partner but there is a reason why they cannot complete part 8, you must provide additional information about their circumstances. Please add a written explanation about these in section 10 of this form.

We will contact you about this if we need more information.

Note to the person being asked to complete this section

The applicant on this form is applying for a means tested bursary from the NHSBSA.

We need to collect information about your finances to help us to calculate how much of the bursary they are entitled to.

8.1 About the person who needs to complete part 8

Surname or family name	<input type="text"/>
First name	<input type="text"/>
Relationship to applicant	<input type="text"/>
Occupation	<input type="text"/>

Acceptable evidence for sections 8.2 and 8.3 (all evidence submitted must be original documents, not photocopies):

- pay slips for the 2014/15 tax year
- P45
- P11D
- accountant's letter
- tax self-assessment form
- HM Revenue & Customs income confirmation
- employer's letter
- benefits letter/statement
- bank or building society statements of interest earned
- dividend statements
- pension statements
- confirmation of income
- confirmation of benefits
- confirmation of earnings
- Child Benefit letter
- Child Support Agency letter
- maintenance court order

8. Partner's finances *continued*

8.2 Income details

Give details of gross income before deductions (such as National Insurance contributions, Income Tax and pensions) from **6 April 2014 to 5 April 2015**.

- Complete every box.
- If a question does not apply to you, write **None** in the answer space.
- Tick the relevant box to indicate what evidence you are sending in.
Refer to the list on page 17 for details of original evidence we will accept.

Description of income	Amount during the 2014/15 tax year	Original evidence sent (tick box)
Salary or wages before deductions Send your payslips	£	<input type="checkbox"/>
Income from self employment Send evidence of amount, e.g. accounts or a tax self assessment form	£	<input type="checkbox"/>
Income as company director Send evidence of amount, e.g. send your payslips	£	<input type="checkbox"/>
State Retirement Pension Send evidence of amount	£	<input type="checkbox"/>
Income from any other pensions Send evidence of amount	£	<input type="checkbox"/>
Bank and building society gross interest (before tax) Send evidence if amount is above £1,000	£	<input type="checkbox"/>
Other investment income (before tax) Send evidence if amount is above £1,000	£	<input type="checkbox"/>
Maintenance payments received Send the court order or other evidence	£	<input type="checkbox"/>
Benefits or allowances - List below and send evidence of amount		
	£	<input type="checkbox"/>
	£	<input type="checkbox"/>
	£	<input type="checkbox"/>
	£	<input type="checkbox"/>
	£	<input type="checkbox"/>
Any other type of income - List below and send evidence of amount		
	£	<input type="checkbox"/>
	£	<input type="checkbox"/>
	£	<input type="checkbox"/>
	£	<input type="checkbox"/>
Please add up all the income you have listed	£	

8. Partner's finances *continued*

8.3 Details of deductions we can take into account

Give details of any deductions made from 6 April 2014 to 5 April 2015.

- Answer all questions.
- If a question does not apply to you, write None in the answer space.
- We cannot allow any deductions unless you provide original documentary evidence.
Refer to the list on page 17 for details of evidence we will accept

Description of deductions	Amount during the 2014/15 tax year
Private pension contributions made Send evidence of amount, e.g. a pension statement	£
Additional voluntary contributions made Send evidence of amount	£
Employee pension contributions made Send your payslip	£
Any other expenses connected with employment (if allowed for tax purposes) List below and send your P2 Notice of Coding for 2014/15 or other evidence	
	£
	£
	£

8.4 Other dependants

List any dependants, besides the applicant, who will be wholly or mainly financially dependent on you during the academic year 2016/17.

Dependant one

First name

Last name

Date of birth

School/college

Name(s) of any funds they receive, such as a student grant and/or student loan. You may be asked to provide evidence of their 2016/17 award

8. Partner's finances *continued*

Dependant two

First name

Last name

Date of birth

School/college

Name(s) of any funds they receive, such as a student grant and/or student loan. You may be asked to provide evidence of their 2016/17 award

Dependant three

First name

Last name

Date of birth

School/college

Name(s) of any funds they receive, such as a student grant and/or student loan. You may be asked to provide evidence of their 2016/17 award

Please use part 10 of this form to provide any additional information that you feel may be relevant to your application.

8.5 Declaration (to be completed by the partner of the applicant)

Read this declaration carefully before signing it.

- The information I have given on this form is complete and accurate to the best of my knowledge and belief.
- I will tell the NHSBSA immediately if my circumstances change in any way that might affect this application.
- I agree to supply any further information the NHSBSA may ask for.
- I understand that if I give the NHSBSA false, misleading or incomplete information, the applicant may be refused financial support or any financial support may be withdrawn and I may be prosecuted.

Full name

Signature

Date

9. Allowances for dependants

9.1 Adult Dependants Allowance

Do you have an adult who is wholly or mainly financially dependent on you?

No Go to section 9.2

Yes Complete the rest of section 9.1

What is the name of your adult dependant?

What relationship is your adult dependant to you?

Please note that you cannot claim for your child as an adult dependant

Is your adult dependant a student?

No

Yes Give details;

Name and level of course

Type of funding received for course

Is your adult dependant your partner?

No Give details below

Yes Go to section 9.2

Your adult dependant's income

Give an estimate of your adult dependant's net income for the 2016/17 academic year and provide original documentary evidence of all income when it ends on 31 August 2017. If they do not have any income, write 'None' in the total box below. Refer to the list below, for details of evidence we will accept.

Estimated taxable net income (after Income Tax, National Insurance and pension contributions have been deducted) List the type of income and give the amount	Adult dependant's estimated net income for the 2016/17 academic year
	£
	£
	£
Please add up all the income you have listed	£

Acceptable evidence for sections 9.1 and 9.4 (all evidence submitted must be original):

- P45
- pay slips
- accountant's letter
- tax self assessment form
- HM Revenue & Customs income confirmation
- employer's letter
- benefits letter/statement
- bank or building society statements of interest earned
- dividend statements
- pension statements
- confirmation of benefits
- confirmation of earnings
- Child Benefit letter
- Child Support Agency letter
- maintenance court order
- confirmation of voluntary maintenance letter
- student loan
- bursary, grant, or other award notification letter

9. Allowances for dependants Continued

9.2 Childcare Allowance

Do you want to apply for Childcare Allowance?

- No Go to section 9.3
- Yes Answer the question below

Do you expect to receive the childcare element of Working Tax Credit, Tax Free Childcare or the childcare costs element of Universal Credit?

- No Go to section 9.3
Submit a *Childcare Allowance application form*, which can be downloaded at:
www.nhsbsa.nhs.uk/swb
- Yes If you are receiving the childcare element of Working Tax Credit or the childcare costs element of Universal Credit, you will not be eligible to receive Childcare Allowance
Go to section 9.3

9.3 Parents' Learning Allowance

Do you have dependent children?

- No Go to part 10
- Yes Go to section 9.4

9.4 Income details

- Complete the following tables.
- Answer all questions.
- If a question is not applicable, write 'None' in the answer space.
- You must provide original evidence of all net income for the 2014/15 tax year. Refer to the list on page 21 for details of evidence we will accept.
- You must send original birth certificates or passports for each child or your Child Tax Credit or Child Benefit award notification letter.

Please note: If you and your children have different surnames, you must send us their long birth certificate with your name on it or your Child Tax Credit or Child Benefit award notification letter.

Income details of your spouse/partner/civil partner. If you do not have a partner please enter 'N/A' in this section.

Net income (after Income Tax, National Insurance and pension contributions have been deducted)

List the type of net income and give the amount	Their income during the 2014/15 tax year
	£
	£
	£
	£

9. Allowances for dependants Continued

Details of children and young people. If you do not have any dependent children, please enter 'N/A' in this section

First name	Last name	Date of birth	Relationship to you	Who the child lives with	Their net income from all sources during the 2014/15 tax year (include court ordered maintenance payments)
					£
					£
					£
					£

10. Additional information

Use this space if you need to continue any of your answers or if there have been any changes which may affect your bursary application such as details about your exempt partner or changes to your course/course attendance (e.g. repeat study etc).

If you need to continue any of your answers, please indicate clearly which questions you are continuing.

11. Data Protection

Data Protection Act 1998

The NHSBSA will use the information that you have provided for the assessment of your application and for the prevention and detection of fraud. We may contact you to discuss your application and our quality of service to you by any methods you have provided. Your personal data will be deleted from our systems and files no later than seven years after the month in which your application is assessed. We will not disclose your personal data to any third party unless they have a lawful right obliging us to do so other than:

- universities/colleges
- local authorities
- organisations from which you receive benefits, bursaries, grants or support
- the Home Office
- Student Finance England
- the Student Loans Company
- HM Revenue & Customs

We will not transfer your personal data outside the European Economic Area.

Third party authorisation

Due to data protection, we are only able to discuss your bursary and other personal details with you and the organisations listed above.

If you would like to authorise another person, such as a parent, to discuss your bursary, please fill in their details below. We will verify their details if the person contacts us. You must sign the applicant's declaration in order for the third party authorisation to take effect and to indicate that you have sought the person's permission for us to contact them.

Third party's first name

Third party's last name

Third party's date of birth

(This will be used as a security question.)

Relationship between you and the third party

12. Applicant's declaration

Read this declaration carefully before signing it. If you choose not to sign it, we will be unable to process your application for a Social Work Bursary.

I declare that:

- A I will be/am taking a postgraduate social work course which is eligible for the Social Work Bursary.
- B I have read and understood the application instructions in full.

By signing this declaration I agree to the following conditions:

- C I understand that Social Work Bursaries are subject to capping, that my university/college are responsible for allocating capped places and that even if I am eligible for a bursary, I may only receive a Placement Travel Allowance if my university/college do not nominate me for a capped place.
- D I will supply any additional information which might be reasonably required by Social Work Bursaries to verify information I have given on this form.
- E I will inform Social Work Bursaries immediately of any change in circumstances that might affect my entitlement to financial support or Social Work Bursaries records relating to me, including but not limited to:
 - withdrawing, suspending, deferring or interrupting the course temporarily or permanently for any reason, regardless of whether I intend to return
 - changing my study pattern from full-time to part-time, or vice versa
 - taking a year or term out from study
 - changing the account I want my payments made to
 - changing address
 - gaining support from a publicly funded body (excluding Student Finance Direct, Access to Learning Fund, government benefit agencies and bursaries from my university) or an employer
- F I accept that Social Work Bursaries will immediately terminate or suspend my funding if:
 - I withdraw, suspend, defer or interrupt the course temporarily or permanently for any reason, regard less of whether I intend to return
 - I take a year or term out from study
 - Social Work Bursaries determines in its absolute discretion that it is reasonable for it to do so
 - I gain support from a publicly funded body (excluding Student Finance Direct, Access to Learning Fund, government benefit agencies and bursaries from my university) or an employer
 - Social Work Bursaries in its absolute discretion determines that I am no longer entitled to financial support
- G Social Work Bursaries are committed to administering entitlement accurately. I agree to pay back to Social Work Bursaries within 30 days of receiving notification any excess payment, fees and any other charges, in the event of the following circumstances:
 - changing my study pattern from full-time to part-time
 - withdrawing, suspending, deferring or interrupting the course temporarily or permanently for any reason, regardless of whether I intend to return

- being unable to attend the course for any reason where it exceeds 15 calendar days in total
- taking a year or term out from study
- being overpaid because I have failed to inform Social Work Bursaries of a change in my circumstances
- where Social Work Bursaries at its absolute discretion determines I have been given financial support to which I am not entitled
- gaining support from a publicly funded body (excluding Student Finance Direct, Access to Learning Fund, government benefit agencies and bursaries from my university) or an employer.

Should I fail to make full repayment of any amount due or agree an acceptable repayment plan with Social Work Bursaries, I agree the debt may be passed to a debt collection agency. I agree that I will be charged for any additional recovery costs at the rate of 7% which will be added to the balance outstanding on referral.

H I consent to the disclosure of information on this form for the purposes of verification and, in compliance with the Data Protection Act, to and from other organisations including:

- Universities
- Local Authorities throughout the United Kingdom
- organisations from which I am receiving benefits, bursaries, grants or support
- Social Work Bursaries software suppliers
- the Department for Work and Pensions
- the Home Office
- HM Revenue and Customs

I consent to the disclosure of information to and by the organisations detailed in the section entitled 'Student's income and expenses' of this form for the purposes of verification of income information provided on this form.

I understand that the administration of Social Work Bursaries and responsibility for counter fraud and security management are both responsibilities of the NHS Business Services Authority. I understand that Social Work Bursaries may share the information on this form with NHS Protect for the purposes of the prevention, detection, investigation and prosecution of fraud or any other unlawful activity.

I I understand and accept that if I fail to give sufficient notice of any change to my bank or building society account details, or provide incorrect details, Social Work Bursaries cannot take responsibility for payments made to an incorrect account, delayed payments or non-payment of the bursary.

I understand and accept that the terms and conditions (including rates) of the bursary may change at any time without notice, and the scheme is subject to continued government funding, which may cease at any time without notice.

I declare that the information given on this form and in any supporting documents provided is complete and accurate. I understand and accept that if I provide Social Work Bursaries with false or misleading information, financial support may be refused or withdrawn and I may be liable to prosecution and/or civil proceedings.

Applicant's full name

Applicant's signature

Date

13. Posting your application to Social Work Bursaries Continued

- Keep** a photocopy of all documents sent for your own records. The NHSBSA cannot take responsibility for applications and evidence lost in the post.
- Attach** a pre-paid, self-addressed Special Delivery envelope if you are sending supporting documents to us, so we can return them to you securely and you can track them once they leave us. If you do not provide this we will return your documents by second class post.
- Pay** the correct postage and write your name and address on the back of the envelope to avoid your mail going astray.
- Post** If you are sending your application by Special Delivery, make a note of your Special Delivery reference number.

Post this form by Special Delivery to guarantee it is delivered to:

Social Work Bursaries
PO Box 141
Hesketh House
200-220 Broadway
Fleetwood
FY7 9AS

14. Checklist

Use the checklist below to make sure that your application is complete.

Have you read the application instructions that accompany this application form?

Yes No

Have you kept a copy of your application form and the instructions for future reference?

Yes No

Have you answered all of the questions in each part of this application that apply to you?

Yes No

Have you securely attached all original evidence we have asked for?

Yes No

Have you included a pre-paid, self-addressed, Special Delivery envelope for the return of your original documents? (Please note that your documents will be returned by second class post if you do not provide this)

Yes No

Have you signed and dated the applicant's declaration on page 27?

Yes No

Have you written down all the documents you are sending with this application in the space provided on page 28?

Yes No

If applicable, have you included a Disabled Student Allowance application?

Please note - you need to apply each year for DSA funding

Yes No Not applicable

Are you sending your application by Special Delivery post?

Yes Make a note of your Special Delivery reference number

No

Social Work Bursary Equality Monitoring questionnaire

NHS Business Services Authority (NHSBSA) Policy

Please provide us with some information about yourself. We do this to make sure that our services are being accessed by everyone who is entitled to use them. It is not compulsory to do so, but you can be assured that all the information you do provide will be kept completely confidential. No identifiable information about you will be passed on to any other bodies, members of the public or press.

1. Which university/college are you studying at?

2. Which course are you undertaking?

3. Which academic year is this application for? Tick one box only.

2016/17 Other Please state:

4. Do you wish to declare information about your status?

NB: We will only use this information to monitor the diversity of applicants. It will not be linked to or stored against your personal details and will not be used for any other purpose.

Yes Go to Question 5

No Go to Question 12

5. What is your gender? Tick one box only.

Male Female Transgender/transsexual I would rather not say

6. Which age group applies to you? Tick one box only.

16-24 years 25-34 years 35-44 years 45-54 years

55-64 years 65 years and over I would rather not say

7. What is your ethnic group? Tick one box only.

This is about the ethnic group to which you feel you belong and not about citizenship or nationality. If you feel you belong to more than one ethnic group, please choose the one you feel you most belong to or choose the 'Mixed/multiple ethnic background' option.

A. White:

English/Welsh/Scottish/Northern Irish/British Irish Gypsy or Irish Traveller

Any other white background Please state

B Asian or Asian British:

- Bangladeshi Indian Pakistani Chinese
- Any other Asian background Please state

C Mixed:

- White and Black Caribbean White and Black African White and Asian
- Any other mixed/multiple ethnic background Please state

D Black/African/Caribbean/Black British

- Caribbean African
- Any other Black/African/Caribbean background Please state

E Other ethnic group

- Arab Prefer not to say
- Any other ethnic group Please state

8. Which of the following best describes your sexual orientation? Tick one box only.

- Lesbian Gay Bisexual Heterosexual/straight Prefer not to say
- Other Please state

9. What is your religion or belief? Tick one box only.

- Christianity or Christian denominations (including Church of England, Catholic, Protestant and all other Christian denominations)
- Buddhism Hinduism Islam Jainism Judaism Sikhism
- Atheism/no religion Prefer not to say
- Other Please state

10a. Are you a disabled person as defined by the Equality Act 2010? Tick one box only.

- Yes No I would rather not say

The Equality Act 2010 defines a disabled person as “someone who has a physical or mental impairment that has a substantial and long-term adverse effect on his or her ability to carry out normal day to day activities”.

10b. If yes, please tick all which apply.

- Long-term illness/health condition Learning Disability / Difficulty
- Mental Health Condition Physical Impairment Sensory Impairment
- Other Please state

11a. Do you have caring responsibilities for any children or adults?

Yes

No

11b. If yes, please tick which apply.

Child(ren)

Adult(s)

11c. If yes, are you a registered carer?

Yes

No

12. Please enter your occupation before the start of your course.

Please enter the occupation of the main earner of your household.

Send this form to us with your completed bursary application.

Thank you for providing your information.