



student finance **england**
the student finance experts

STUDENT FINANCE
MATTERS
TO ME

DSA SLIM
DISABLED STUDENTS'
ALLOWANCES
2014/15
APPLICATION FORM



SFE/DSASL/1415/A



/sf_england



/SFEngland

What do I need to do to get Disabled Students' Allowances (DSAs)?

Here is a summary of the steps involved in applying for and receiving DSAs.



1

Fill in the application form

Complete and return this DSA application form with all of the requested evidence.



2

Find out if you qualify

Once we have received your application and all of your evidence we will assess your application and send you a letter to let you know if you qualify for DSAs or not.



3

Attend a needs assessment

If you are eligible for DSAs you will need to arrange a needs assessment to identify any specialist equipment and other support that you may need for your course.



4

Receive your needs report

After you attend your needs assessment you will be sent a needs report, which identifies the equipment and other support you will need, how much it will cost, and where to get it from.



5

Find out what the DSAs can pay for

We will send you a letter to tell you whether any equipment and other support that has been recommended in your needs assessment can be paid for from DSAs. We will also give you instructions for ordering equipment or arranging other support.



6

Receive your support

Your funding will be paid direct to the supplier of the equipment or service.

Where can I find more information about Disabled Students' Allowances?

Go to **www.gov.uk/studentfinance** for information and guidance.

Alternative formats

You can order forms and guides in Braille, large print or audio.

You can either:

- email your name, address and customer reference number along with what form and format you require to **brailleandlargefonts@slc.co.uk**; or
- telephone us on **0141 243 3686**

Please note, the above email address and telephone number can only deal with requests for alternative formats of forms and guides.

How can I contact you?

- Visit **www.gov.uk/studentfinance**
- Contact us on **0300 100 0607** or by textphone on **0300 100 0622**.

Instructions

- Whenever you see **e** you must provide evidence to support your application.

section 1 personal details

Customer Reference Number

Forename(s)

Surname

Sex

Date of birth

<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"/>
<input type="text"/>									
<input type="text"/>									
<input type="checkbox"/>	Male				<input type="checkbox"/>	Female			
<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Contact details

- b** Please give your current home address. If you know it, please also give your term-time correspondence address.

Home address	Term-time address
<input type="text"/>	<input type="text"/>
Postcode <input type="text"/>	Postcode <input type="text"/>
Home phone number <input type="text"/>	Date on which you will move to this address <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Mobile phone number <input type="text"/>	
Email address <input type="text"/>	

section 2 other financial support

In academic year 2014/15 will you be eligible to apply for any of the following:

a1 A Department of Health or NHS Bursary excluding the Social Work Bursary paid by the NHS Business Services Authority

 Yes No

a2 A Scottish Government Health Directorate Bursary (Scottish Healthcare Allowance)

 Yes No

a3 A Healthcare Bursary from the Department of Health for Northern Ireland

 Yes No

! If you answered 'Yes' to any of the above questions **do not continue** with this application. You should contact the provider of your bursary for advice on any extra support you may be entitled to.

b Do you currently receive any financial help towards travel costs? - e.g. mobility component of Disability Living Allowance or Personal Independence Payment

 Yes No

If 'Yes', please provide full details including amounts

Type of financial help

Amount (£)

Type of financial help	Amount (£)

section 3 your disability, mental health condition or specific learning difficulty

a Please give full details and provide evidence of your disability, mental health condition or specific learning difficulty.

e Physical disability/mental health condition

You should provide a written medical statement from a doctor or appropriately qualified specialist, confirming the nature of your disability or mental health condition.

e Specific learning difficulty (for example, dyslexia)

You should provide a full diagnostic assessment carried out after your 16th birthday by a psychologist or suitably qualified specialist teacher. If you had a diagnostic assessment carried out before your 16th birthday it will usually require an update so we can fully assess how your study will be affected by your specific learning difficulty.

It is your responsibility to pay any costs to obtain the required evidence.

b On what date was your disability, mental health condition or specific learning difficulty last assessed?

/ /

section 3 your disability, mental health condition or specific learning difficulty

c Is this your first application for Disabled Students' Allowances (DSAs)?

Yes

No

If 'Yes' go to **Section 4**

If 'No', please provide details of each previous DSA funding application you have made.

Date of application	Funding authority applied to e
/ /	
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e You must provide evidence showing the result of each previous DSA funding application and any DSA Needs Assessment Report you received from the funding authority.

If you cannot provide the evidence requested, please provide full details of the funding you received in the box below.

We may contact the relevant funding authorities for further information.

section 4 your consent

! Please tick the boxes below to give consent to the following DSAs arrangements. If you do not give consent it may delay any payments you receive.

I agree that Student Finance England, the disability adviser at my university or college, and my DSAs Needs Assessor may exchange information about my application for DSAs where this is necessary to make sure I get the help I need.

I agree that Student Finance England, equipment suppliers, and non-medical help suppliers may exchange information about my application for DSAs where this is necessary to make sure I get the help I need.

I agree that Student Finance England can pay the suppliers of equipment and support directly.

section 5 your bank or building society account details

Where possible we will pay suppliers of your equipment or support services directly. However, please complete the section below so that we can pay you if we need to. You do not need to provide these details if you have already given them to us.

The account must be in your own name and be able to accept direct credits.

Sort code

Account number

Building society roll number
(if applicable)

Declaration

Our Data Protection Statement sets out who will use the information provided on this form and what they will use it for. Before signing this form please read our statement at **www.gov.uk/studentfinance**

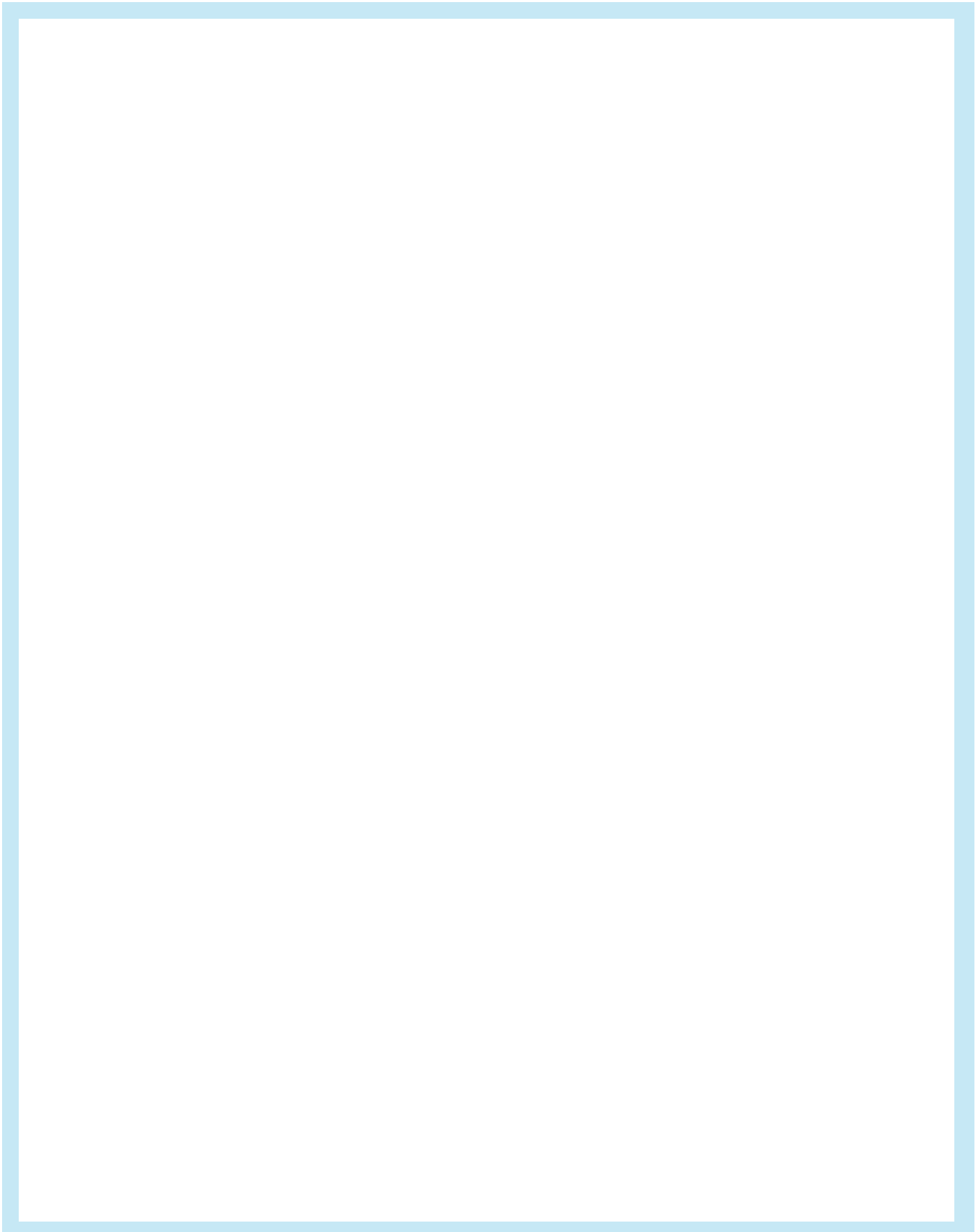
Alternatively, you can request a copy by writing to the Student Loans Company (SLC) at 100 Bothwell Street, Glasgow, G2 7JD or by calling us.

- 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 may not receive financial support, any support I have had may be withdrawn and I could be prosecuted.

<input type="text"/>	
Your signature	Today's date
<input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

Additional notes

If you are providing extra information below please clearly mark what section and question number the information is about.



Checklist

Before returning this form, please make sure you have done the following:

- Signed and dated the declaration.
- Enclosed all the evidence requested to support your application. Any original evidence you send will be returned to you as soon as possible. **e**



Please remember to pay the correct postage fee.

Once you have completed this form, and signed and dated the declaration, please return it to us at:

**Student Finance England
PO Box 210
Darlington
DL1 9HJ**