### **OFFICE USE ONLY**

Application received:

UCNL

**UCDon** 

## Lincolnshire and Yorkshire & Humber Institute of Technologies 2024/2025

#### 1. What is it?

loT training providers have comprehensive support services for students including mental health, mentoring, financial, broad pastoral, and academic services and the purpose of this bursary is to complement this support and remove the barriers to Under Represented Groups (URG) enrolling, attending and achieving their higher-level technical qualifications and moving into employment.

Financial support for Higher Education students and apprentices can vary based on individual circumstances and this Bursary fund provides the flexibility for IoT training providers to remove any barriers that are preventing students and apprentices from enrolling, attending, fully participating, and successfully achieving a course at an IoT partner.

Eligible students could be awarded up to £1000 towards course - related costs depending on their financial need.

### 1. Eligibility

**Email Address** 

- You must be enrolled as a student of the Lincolnshire or the Yorkshire and the Humber Institute of Technologies
- Reside in an eligible postcode area
- Study on an IoT course at Level 4/5

SECTION 1—PERSONAL DETAILS

 If there is a low number of eligible students' further criteria will be added and additional applications may be accepted from Level 3 and 6 students.

## 3. How to apply

- Use blue or black ink and write in CAPITALS
- Answer ALL questions
- Provide a Copy of your Student Finance England 'Notice of Entitlement' (where applicable)
- Email your completed application along with all of the required supporting evidence to:

UC Don: financialassist@don.ac.uk

UCNL: Financial.support@northlindsey.ac.uk

If you have any queries regarding your application, please contact a member of the team.

| Forename         |  |
|------------------|--|
| Surname          |  |
| Student Number   |  |
| Course Title     |  |
| Telephone Number |  |
|                  |  |

# Section 2 - Eligible Category

The IoT is keen to support students from underrepresented groups, please tick the category that is most suited to your situation:

| Tick | Category                                                | Evidence required                                                                                                                |  |  |  |  |  |
|------|---------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|--|
|      | Student with children, especially single parents        | Council Tax Bill evidencing single occupancy                                                                                     |  |  |  |  |  |
|      | Mature students with existing financial commitments     | Student Finance England Notification for Level 4 -6 students / A completed Financial Assistance application for Level 3 students |  |  |  |  |  |
|      | Students from a low-income family                       | Student Finance England Notification for Level 4 -6 students / A completed Financial Assistance application for Level 3 students |  |  |  |  |  |
|      | Students with a disability/learning difficulty          | Evidence will be gathered internally                                                                                             |  |  |  |  |  |
|      | Students that were previously in care (a 'care leaver') | A letter from the Local Authority                                                                                                |  |  |  |  |  |
|      | Underrepresented gender in curriculum area              | Evidence will be gathered internally                                                                                             |  |  |  |  |  |
|      | Underrepresented BME in curriculum area                 | Evidence will be gathered internally                                                                                             |  |  |  |  |  |

## Section 3 - Support required

Please indicate what support you require, please note that we can only support with college related costs (we are unable to support with household bills or living costs)

| Tick | Support Type                                                         | Amount |  |  |
|------|----------------------------------------------------------------------|--------|--|--|
|      | Fees for self-funding students (Please completed section 6)          |        |  |  |
|      | Specialist protective clothing                                       |        |  |  |
|      | Cost of for essential field trips                                    |        |  |  |
|      | Costs associated with attending university open events / interviews. |        |  |  |
|      | Costs relating to work placements                                    |        |  |  |
|      | Cost related to employment interviews                                |        |  |  |
|      | Cost of specialist books or equipment required for their course      |        |  |  |
|      | Examination resit costs                                              |        |  |  |
|      | Travel costs (Please completed section 5)                            |        |  |  |
|      | Additional Childcare Costs (Please completed section 4)              |        |  |  |

## SECTION 4—Additional Childcare Costs

You could be eligible for help towards additional childcare costs, this would include in things such as funding for timetabled classes or seminars, and it does not support independent study.

Bursary funds would be paid directly to the childcare provider after we receive the monthly invoice. No bursary funds will be paid directly to

| Name of childcare provide                                                                                                                                                    | er  |               |  |  |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|---------------|--|--|--|
| OfSted Registration Numb                                                                                                                                                     | per |               |  |  |  |
| Address                                                                                                                                                                      |     |               |  |  |  |
| Contact Name                                                                                                                                                                 |     |               |  |  |  |
| Contact Number                                                                                                                                                               |     |               |  |  |  |
| Email address                                                                                                                                                                |     |               |  |  |  |
| Please provide details of the children below that you need childcare support with. You will be required to provide a copy of their birth certificates with this application. |     |               |  |  |  |
| Child 1                                                                                                                                                                      |     | Date of Birth |  |  |  |
| Child 2                                                                                                                                                                      |     | Date of Birth |  |  |  |

### Childcare Terms and Conditions

Please read the following carefully

- I understand that if my application for support is unsuccessful or my support is withdrawn due to non-attendance, I am liable for any
  outstanding costs. f
- Where I am eligible to receive Government Funded Childcare hours, I understand that these hours must be used for my timetabled guided learning hours and that this support will only contribute towards my childcare costs where these hours exceed my Government Funded Hours. f
- I understand that it is my responsibility to inform the Financial Support Team of any changes to my timetabled guided learning hours. *f*
- Agree notice period to the nearest half a term or 4 weeks (whichever is greater) if child is to be removed. *f*
- I understand that the childcare contract I am taking out is a binding agreement between myself and my childcare provider & that DN
  Colleges is a third party in this agreement. Should I not adhere to the terms and conditions attached to childcare support and as a
  result my childcare support is withdrawn, I understand that I will be liable for any outstanding costs.

| SECTION 5—                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Travel                                        |              |            |              |            |          |            |        |             |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|--------------|------------|--------------|------------|----------|------------|--------|-------------|--|
| If you live more than 3 miles from College, what mode of transport do you use?                                                                                                                                                                                                                                                                                                                                                                                                            |                                               |              |            |              |            |          |            |        |             |  |
| Bus                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | Train                                         | Car/Motorbil | Other      | (please stat | e)         |          |            |        |             |  |
| SECTION 6— Tuition Fee ( for self funding students)                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                               |              |            |              |            |          |            |        |             |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Do you have to pay for your tuition fees? Y N |              |            |              |            |          |            |        |             |  |
| ·                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | uition fee loan from S                        |              | e England? | Y            | N          | <b>1</b> |            |        |             |  |
| SECTION 7 -                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | -DAINN DE IAIL                                | 3            |            |              |            |          |            |        |             |  |
| Bank Name (e.g. H                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | ISBC)                                         |              |            |              |            |          |            |        |             |  |
| Account Number (8                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | 3 digits)                                     |              |            |              |            |          |            |        |             |  |
| Sort Code (6 digits                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | )                                             |              |            | 1            |            |          | 1          |        |             |  |
| Account Holder (e.                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | g. Mr A Smith)                                |              |            |              |            |          |            |        |             |  |
| SECTION 8—I                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | DECLARATION                                   |              |            |              |            |          |            |        |             |  |
| You MUST sign th                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | nis declaration                               |              |            |              |            |          |            |        |             |  |
| The information I have given on this form is complete and accurate to the best of my knowledge.  I understand that if I give The DN Colleges Group misinformation, or do not give complete information, I may be refused assistance now and in the future, or I may be prosecuted and my financial assistance withdrawn.                                                                                                                                                                  |                                               |              |            |              |            |          |            |        |             |  |
| I understand that some of the information provided in this form and details of any allocations I am awarded may be shared with other organisations that handle public funds in order to prevent/detect fraud.                                                                                                                                                                                                                                                                             |                                               |              |            |              |            |          |            |        |             |  |
| Note: It is your re                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | sponsibility to info                          | rm us of any | changes to | your cire    | cumstances | which mi | ght affect | this a | pplication. |  |
| DATA PROTECTION                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | ON & PRIVACY NO                               | TICE         |            |              |            |          |            |        |             |  |
| In accordance with the Data Protection Act 2018, you are advised that the information submitted on this form will be used for the purpose of processing your application and stored electronically. Your consent to record and process these details is required. If you are unwilling to provide your consent to the recording and processing of this information, including the use of your image for the purposes described, The DN Colleges Group may be unable to offer you support. |                                               |              |            |              |            |          |            |        |             |  |
| Signed Print Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                               |              |            |              |            | D        | ate        |        |             |  |