

General Bursary Fund 2011/12 Academic Year

1. Personal Details

UoB Student No.: _____ Name: _____

Contact Address: _____

Postcode: _____

Contact Telephone No.: _____ Mobile No.: _____

Email Address: _____

Please confirm whether you are a UK or EU student:

UK Student

EU Student

2. Application Process

- Please attach a **typed** personal statement of your financial need and how this award would help you with your studies.
- Please also complete the Financial Assessment Form overleaf. If you have already applied for the Access to Learning Fund this academic year you do not need to complete the assessment form.

3. Declaration

I confirm that I have read the guidance notes and the eligibility criteria and that I have only applied for Bursaries where I fulfil all the criteria. To the best of my knowledge, all information provided in this form is correct and complete. I understand that giving false information will automatically disqualify my application and I further undertake to repay any scholarship obtained by me as a result. I agree to the University of Bedfordshire processing the personal data contained in this form for purposes connected with my application for a scholarship. **I understand that I may be required to be available for any reasonable publicity that the University considers to be appropriate and that I may be required to meet the benefactor of any scholarship/ bursary for which I have applied.**

Signature: _____ Date: _____

Please return by 9th March **2012**

Hand in this form at your nearest SiD Desk,



Log an enquiry and attach the form via SiD Online
sid@beds.ac.uk

Financial Assessment Form

If you have already applied to the Access to Learning Fund this academic year you do not need to complete this form. If not please enter applicable amounts below.

Your Income (in figures)

Maintenance Grant/ Special Support Grant	
Student Maintenance Loan	
Parents Learning Allowance	
Adult Dependants' Grant	
Childcare Grant	
NHS Bursary	
Social Work Bursary	
Teacher Training Bursary	
University Bursary	
Disabled Living Allowance	
Net Earnings	
Parental/ Partner Contribution	
CSA Payment/ Maintenance	
Child Tax Credits	
Working Tax Credits	
Child Benefit	
Housing Benefit/ Local Housing Allowance	
Council Tax Benefit	
Income Support/ Jobseekers' Allowance	
Professional/ Career Development Loan	
Scholarships/ Trusts/ Grants	

Disability benefits (please specify)

Other income/ savings (please specify)

Total Income:

Your Expenditure (in figures)

Food/Household/Laundry	
Gas	
Electricity	
Water	
Telephone	
TV License	
Contents Insurance	
Life Insurance	

Living Costs

Council Tax	
Rent/ Mortgage	
Childcare Costs	
CSA Contributions/ Child Maintenance	
Public Travel Costs (daily during term time)	
Private Travel Costs (road tax, fuel, insurance, maintenance etc)	
Books/ Equipment/ Course Costs (including photocopying)	
Building Insurance	

Disability costs not covered by DSA (please specify)

Other costs (please specify)

Total Expenditure: