

CONFIDENTIAL

**Greenwich Hardship Fund**

Application Form 2022-23

**Part 1A: Personal Details**

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| |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | | **0** | **0** |  |  |  |  |  |  |  |   **Student ID number** |
| **Title: Mr**  **Mrs**  **Miss**  **Ms  Other**  **Please state:** |
| **First Names (in full):** |
| **Family name (in full):** |
| **Full Current address:**  **Postcode:** |
| **Email\*: \_\_\_\_\_\_\_\_\_\_\_@gre.ac.uk Mobile number: 07\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age: \_\_\_\_\_**  **\**We will contact you using your university email address. Contact Student Helpline (020 8331 7555) if you have any difficulty logging into your university email.*** |

**Part 1B: Accommodation Details**

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| --- |
| **Do you live:**  **a. In halls of residence?** *(Go to Part 2)* **b. As single parent with child/children?** *(Go to Part1C)*  **c. With partner/spouse?** *(Go to Part 1C)* **d. Alone?** *(Go to Part 2)*  **e.\*In shared accommodation?** *(Go to Part 2/1C)* **f. With parent(s) or guardian(s)?** *(Go to Part2)*  **\* How many adults live at this address including yourself? \_\_\_\_\_\_**  **\*Do you share all household expenses equally? Yes/No** |

**Part 1C: Dependant Details**

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| **Do you have any children who are financially dependent on you? Yes**  **No** |
| |  |  |  | | --- | --- | --- | | **Full Names:** | **Date of Birth** | **Do they live with you?** | |  |  |  | |  |  |  | |  |  |  | |  |  |  | |
| **Do you have any adults who are financially dependent on you? Yes**   **No**   |  |  |  | | --- | --- | --- | | **Full Names:** | **Relationship to you:** | **Do they live with you?** | |  |  |  | |  |  |  | |

**Part 2: Care Leaver/Carer**

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| **Are you a Care Leaver? Yes**   **No**  A Care Leaver is a person aged 25 or under, who has been looked after by the local authority/foyer/other supported  Living for at least 13 weeks since the age of 14. |
| **Do you have Carer’s responsibilities? Yes**   **No**  A carer is an individual who is responsible for the care of an adult and may have previously been in  receipt of carer’s allowance. |

**Part 3: Disability/Special Medical Needs**

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| **Do you have a disability or chronic medical condition? Yes**   **No**  **If yes, please give details:** |
| **Have you applied for Disabled Students Allowance (DSA)? Yes**   **No**  **If yes, please give details:** |

**Part 4: Programme Details**

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| **Programme Title: Undergraduate**  **Postgraduate** |
| **Main campus/college where you are currently studying: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Current Year of Study: 1**  **2**  **3**  **4**    **Is this a repeat year: Yes**  **No**  **Is this your final year: Yes**  **No**  **Is this a placement year: Yes**  **No**  ***if yes is it a paid placement?* Yes**  **No** |

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| **Part 5: Student Annual Income**  *Please complete all boxes. If not applicable put* ***N/A or None*** | | | |
| **See checklist reference** | **Student Funding** | | **Per**  **Year**  **£** |
| **1** | **Maintenance Loan or Postgraduate Loan amount** | |  |
| **1** | **Maintenance Grant/Special Support Grant** | |  |
| **1 or 2** | **Adult dependants Grant** | |  |
| **1 or 2** | **Childcare Grant** | |  |
| **1 or 2** | **Parents Learning Allowance/NHS Parental Support Grant** | |  |
| **2** | **NHS Training Grant & Specialist Subject Payment** | |  |
| **2** | **NHS Social Work Bursary** | |  |
| **6** | **University Bursary**  **(e.g*. GSP, High Achievement Scholarship....etc)*** | |  |
| **6** | **PCDL/Trusts/Grants/Any external scholarships** | |  |
| **3** | **Teacher Training Bursary** | |  |
|  | **Other weekly/monthly Income**  **(*including partner’s income if applicable*)** | **Per**  **week**  **£** | **Per**  **Month**  **£** |
| **5** | **Child Tax Credit** |  |  |
| **5** | **Working Tax Credit** |  |  |
| **4** | **Child Benefit** |  |  |
| **10** | **Housing Benefit, Council Tax Benefit or any Housing Allowance** |  |  |
| **10** | **Income Support, JSA or ESA** |  |  |
| **10** | **Universal Credit or any other benefits** |  |  |
| **10** | **Disability Living Allowance\*** |  |  |
| **6** | **Spouse/Partners Income** |  |  |
| **6** | **Child maintenance/CSA** |  |  |
| **6** | **Any other income - including Parental support** |  |  |

**\****Please include if awarded for any dependent children*

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| --- | --- | --- | --- |
| **Part 6: Expenditure**  *Please complete all boxes If not applicable put* ***N/A or None*** | | | |
| ***Composite living costs have already been calculated in our assessment by the government for the following items: Food, Utility Bills, Mobile Phones, TV Licence, Home Contents Insurance and Entertainment. Please do not include these items in your expenditures below*** | | | |
| **Checklist reference** | **Additional Student and Spouse/Partner expenditure** | **Per**  **week**  **£** | **Per**  **Month**  **£** |
| **15** | **Books, study materials and/or field trips**  *Students with exceptionally high costs should provide evidence from programme leader* |  |  |
| **16** | **Travel Costs (current accommodation to institution)**  *Please tick as appropriate*  Oyster card  Rail travel card  University bus  own car  other    *(Travel costs can also be claimed for partner/spouse if applicable)* |  |  |
| **8** | **Rent/Mortgage (***Please tick payment option as appropriate)*  Direct Debit/BACS  Cash  Rent top up card  Cheque    *Evidence of these payments must be provided*  **Does rent include Bills? Yes  No** |  |  |
| **9** | **Council Tax**  **(***Full time students are exempt from council tax or discounted if living with partner/spouse****)*** |  |  |
| **9** | **Building Insurance**  *(for mortgage only)* |  |  |
| **10** | **Childcare costs**  (Registration Number of child care provider :………………………………..)  Direct Debit/BACS  Cash Cheque  *Evidence of these payments must be provided* |  |  |
| **12** | **Medical Expenses**  (*Specify and provide receipts*) |  |  |
| **13** | **Debts incurred during your study for which you have an agreed payment plan.**  *(Please note that we cannot include debts incurred prior to commencing your studies)* |  |  |
| **Part 7: Commuter Bursary (New First year students only)** | | |  |
| If your travel costs are excessive between your term-time address to university, you may be eligible for additional financial support from the commuter bursary: gre.ac.uk/bursaries/commuter-bursary. If you would like to be considered for this bursary you must provide evidence on your travel costs. | | | |
|  | | **Yes** | **No** |
| I would like to apply for the commuter bursary and have submitted my travel expenses | |  |  |
|  | |  |  |
| **Part 8: Digital Access Bursary (New First year Students Only)** | | | |
| If you are from a low income family and don't have a suitable computer/laptop or have poor broadband  connection and can't afford to upgrade, you may qualify for the Digital Access Bursary as part of your  application to the Greenwich Hardship fund. | | | |
|  | | **Yes** | **No** |
| I would like to apply for the Digital Access Bursary | |  |  |
|  | |  |  |
| **Part 9: Energy Bill Support (New First year Students Only)** | | | |
| The University of Greenwich wishes to support students from low-income families who are struggling with the Cost of Living by supporting them with cash payment towards their energy bill.   * Applicants must provide a copy of the energy Bill (Gas & Electricity) in their name * Only available to non- residents of University of Greenwich Halls | | | |
|  | | **Yes** | **No** |
| I would like to apply for the Energy Support | |  |  |
|  | | | |
|  | | | |

**Part 10: Supporting Statement – *This section must be completed***

**Please state why you are in financial difficulty and why you believe your situation is exceptional and merits additional support**. (*Please write clearly and use a separate sheet if needed*)

**Part 11: Payment**

Payments to students will be made in one instalment where the award is for less than £500. Awards over £500 will be made in either one or two instalments depending upon specific circumstances identified at the time of assessment and will be clarified in the award letter you will receive. You cannot request an award be made in one instalment where the decision is made to pay in two.

Payment will be made directly to your nominated bank account. It is your responsibility to input the details onto the portal and to keep them up to date. To do this, log in to the portal at

https://portal.gre.ac.uk/cp/home/displaylogin select “Student Records”, then “Personal Information” then “View bank details” and follow the instructions. This is a secure area that updates the information directly onto your student record

We may also be able to make payments towards outstanding debts to a third party.

Please tick the box if you want to

* Pay University Accommodation from GHF award
* Pay a third party for outstanding debts from GHF award (Please provide following details)

Name of Payee: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address of Payee: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Account or Reference Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Part 12: Nationality Declarations**

**Please tick where appropriate**

**I certify that to the best of my knowledge; I fulfil the following criteria:**

I am a UK national

I am an EU national in receipt of a maintenance loan

There are no restrictions on my stay, and I am therefore settled within the UK.

I have been recognised by the UK Government as a Refugee and have Full Refugee Status

I am an EEA Migrant Worker or Swiss employed person or their spouse or child.

I have been ‘Ordinarily Resident’ within the UK and Islands for 3 years (**5 years if commencing study from September 2016**) immediately before the start of my course.

**Declaration**

I confirm that I am supporting the children named on this form

I confirm that I am not living with a spouse/partner

I confirm that I am registered and in attendance on the programme described in this form

I confirm I have provided details of **ALL** my bank/savings/investment/mortgage accounts

I confirm that I have notified the DWP/Job Centre Plus or relevant agency of my student status in relation to the benefits I am receiving.

I declare that the information that I have given on this form is correct and complete to the best of my knowledge and giving false information will automatically disqualify my application and may also lead to disciplinary procedures resulting in possible expulsion from the University. I further undertake to repay any grants obtained by me as a result.

I understand that if I have provided you with any third party personal data, I should inform the individual or individuals named that I have disclosed their details to the University

I understand that if I qualify for an award and I have an outstanding short term loan this will be repaid from the award before any payment is made to me.

Please tick here if you would like to apply for the Commuter Bursary

Student Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_

**STUDENT CHECKLIST**

**ALL EVIDENCE MUST BE SUBMITTED BELOW ELECTRONICALLY**. Your application will not be assessed unless all the relevant information is provided. All documents will be retained by the University for auditing purposes.

1.  **Student Support letter from Student Finance England 2022-23 (University or College Payment Advice letter*)***

2.  **NHS/SW bursary letter for 2022-23** *(NHS/Social Work Bursary)*

3.  **Teacher Training Bursary Award letter**

4.  **A copy of DWP Child Benefit** award letter - If this does not show the dates of birth of the children, please provide copies of birth certificates

5.  **All pages of your Child and/or Working Tax Credit Award letter from HM Revenue & Customs for 2022-23**

6.  Evidence of **all partner income** (e.g. benefit award letters, pay slips, Student maintenance loans/grants, PG funding from any source.

7.  **Fully detailed bank statements** for the **last three months** for **ALL Bank accounts** (**including partner if applicable**). *Internet bank statements can only be accepted if they show your name and account number and should be downloaded as a PDF document.* ***Statements should include payment of your student loan /NHS Bursary payment***

8.  **Current Tenancy or mortgage agreement showing the amount you are currently paying,** with evidence of your weekly/monthly payments. *(If student is living with parent, a letter should be provided showing evidence of Housing Benefit)*

9.  **Council Tax Bill for 2022-23 if living with a Partner, Building Insurance** (if appropriate)

10.  **Evidence of weekly amount of Childcare Grant** paid to your registered childcare provider – please download your payment history from the SFE Childcare Grant payment service (further evidence of childcare costs/payments may be required later)

11.  **A letter from your local authority confirming previous care arrangement/evidence of previously being in receipt of Carer’s Allowance**

12.  **Evidence of all benefits claimed – all pages of any benefit award letters or all parts of any online benefit statements**

13.  Evidence of **other sources of financial hardship**

14.  Letters showing the **refusal of any statutory suppor**t mentioned above.

15.  **Oyster card online statement/receipts for travel costs** covering a minimum period of 1 month during term time

16.  **Receipts for laptops/Evidence of field trips/Letter from Tutor**

17.  **Energy Bill Support –** a copy of the energy bill (gas and electric) in the applicants name within the last three months.

**Confidentiality**

For more information about how we process your personal data, please refer to the [Privacy Notice](https://docs.gre.ac.uk/rep/sas/student-finance-and-financial-support-privacy-notice).

**Office Use only**

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| --- |
| Name of campus Staff: |
| Date received on campus: Bank Details verified: YES/NO |
| **Supporting Notes**: |

**Part 13: Submission and Supporting Evidence**

Please submit the FULLY completed application form with supporting documentation relative to the applicant’s circumstances as per the above Student Check list in PDF or Word Format to [fab@gre.ac.uk](mailto:fab@gre.ac.uk)