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| **Ref** | **H** |  |
| **ACCESS TO LEARNING FUND GRANT APPLICATION 2022-23****Part-time Higher Education Students** |

***Please print clearly in BLACK or DARK BLUE ink***

**When completing this form, it will be assumed that you have read the Notes of Guidance which is available on line on:** [**https://www.bradfordcollege.ac.uk/help/knowledge-base/access-to-learning-fund-2/**](https://www.bradfordcollege.ac.uk/help/knowledge-base/access-to-learning-fund-2/)

**You will need to refer Notes of Guidance for information about what documents you need to provide with your application.**

#### Section 1 – About You (all students should complete every section on this page)

**Your details should match those given on your registration record. If they do not your application will be rejected.**

|  |
| --- |
|  |
|  Number from College ID Card |  |  |  |  |  |  |  |  | Title |  |  |
|  |
|  First name (s) |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |
|  Last name(s) |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |
|  Address |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  | Post code |  |  |  |  | - |  |  |  |
|  |
|  Home telephone number (inc dialling code) |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |
|  Mobile number |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |
|  Email |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |
|  Course  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |
| Which year are you Studying?  | How many days are in classes per week? |
|  |
|  | 1 |  | 2 |  | 3 |  | 4 |  | 5 |  | 1 |  | 2 |  | 3 |  | 4 |  | 5 |  |
|  |

#### Section 2 – Password

|  |  |  |
| --- | --- | --- |
|  |  |  |
|  | To protect your information and to ensure we are dealing with an authorised person, we are asking everyone to set up a password. If we receive an email or telephone call from someone who is unable to quote this password and your College ID number, **we will not discuss your application with them.** If you call into HE Student Finance, we will discuss your application providing you have your College ID with you or you can give your password. Please print clearly |  |
|  |  |  |
|  | Password |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |

#### Section 3 – Which Element Do You Want To Apply For?

|  |  |
| --- | --- |
|  | Course Materials: How much will you spend on essential books/materials? £…………….. Per annum |
|  | Travel – Part-time: How much does it cost you to travel to College? £……………. Per week |
|  | Travel – EU Full-time: How much does it cost you to travel to College? £……………. Per week  |
|  | Childcare |
|  | Tuition Fee Top-Up |

#### Section 4 – Bank Account Details

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|  |
|  | Bradford College Access to Learning Fund payments are paid direct into your bank account by BACs. The payment can be made into current accounts and savings accounts at most Banks or Building Societies. However, we cannot make payments into Post Office accounts, accounts that need a Roll number, or to Credit Unions.**You must supply details of your own account. We are unable to make a payment to a third party.** Please make sure you give the correct details. If you give the wrong details and a payment is made, you will lose this payment. |  |
|  | Account Holders Name |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | Sort Code | Account Number |  |
|  |  |  | - |  |  | - |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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#### Section 5 – Student’s Declaration

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| --- | --- | --- |
|  |  |  |
| • | I declare that the information I have given on this form, including any supporting statements/ documents, is correct and, to the best of my knowledge, complete. The documents I have provided accurately show my current level of household income. |  |
| **•** | I understand that by applying to the Bradford College Access to Learning Support Fund I am agreeing to all the terms and conditions as they appear in the Bradford College Access to Learning Fund Policy. A copy of these are available on the College’s web site or from HE Student Finance. |  |
| **•** | I feel that if I do not get any money to help me, I will be unable to continue on my course and will be at risk of having to withdraw. |  |
|  |  |  |
|  | Signature |  | Date |  |  |
|  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Received Date: |  | Time: |  |