education and skills



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EU STUDENTS: Application for Tuition Fee Support for Academic Year 2005/2006

You can also obtain a printable copy of this application form online at www.dfes.gov.uk/studentsupport/eustudents/index.shtml or you can contact the EU Team on telephone number 01325 391199 (between the hours of 10.00 - 16.00 Monday to Friday) or by e-mail: EUTeam@dfes.gsi.gov.uk

Do not fill in this form if you will, or are likely to, receive a bursary from the National Health Service (NHS) or Department of Health (DoH) which is **non** income-assessed. If you have applied for a NHS/Medical degree course you may wish to contact the NHS Bursaries Section on 01253 655655 for more details.

Checklist

- Complete this form in black ink and use CAPITALS
- Tick all the boxes that apply
- Please use the Guidance Notes to help you complete this form.
- Information on the documentary evidence acceptable for individual countries can be found on the EU Team website at www.dfes.gov.uk/studentsupport/eustudents/index.shtml
- You **MUST** answer all the questions, entering N/A (Not Applicable) or None if appropriate.
- You MUST provide all evidence asked for DO NOT SEND IN THE FORM WITHOUT ALL OF THE REQUIRED DOCUMENTS, as we will not be able to process your application.
- You can send in original documents or a *certified copy.
- *A CERTIFIED COPY IS A PHOTOCOPY OF AN ORIGINAL DOCUMENT WHICH <u>MUST</u> HAVE BEEN STAMPED AND SIGNED AS BEING A TRUE COPY OF THE ORIGINAL BY AN OFFICIAL: A MINISTER OF RELIGION, DOCTOR, LAWYER, CIVIL SERVANT, TEACHER/LECTURER, POLICE OFFICER.

 THE PERSON CERTIFYING THE COPY <u>MUST</u> PROVIDE THEIR NAME, JOB TITLE, ADDRESS AND CONTACT TELEPHONE NUMBER. THE CERTIFYING PERSON MUST NOT BE A RELATIVE.
- Please be aware that your form will be returned to you if you fail to send us the required document(s) or do not complete all of the form.
- RETURNTHIS FORM TO: DEPARTMENT FOR EDUCATION AND SKILLS, EUTEAM, MOWDEN HALL, DARLINGTON DL3 9BG, UK.

Quick Reference

The following icon is featured throughout the form as a quick reference guide.

Refer to Guidance Notes page



DEADLINES FOR RECEIPT OF THIS APPLICATION FORM:

YOU MUST APPLY NO LATER THAN NINE MONTHS AFTER THE START OF THE ACADEMIC YEAR. APPLICATIONS RECEIVED AFTER THE STATED DEADLINES WILL NOT NORMALLY BE ACCEPTED AND YOU MAY NOT BE ENTITLED TO TUITION FEE SUPPORT FOR THAT ACADEMIC YEAR. THE FOLLOWING DEADLINES THEREFORE APPLY:

COURSES STARTING BETWEEN -

- 1 SEPTEMBER 2005 AND 31 DECEMBER 2005
- 1 JANUARY 2006 AND 31 MARCH 2006
- 1 APRIL 2006 AND 31 AUGUST 2006

DEADLINE IS 31 MAY 2006

DEADLINE IS 30 SEPTEMBER 2006

DEADLINE IS 31 DECEMBER 2006

EU5N — over

SECTIONS YOU NEED TO COMPLETE

Your Circumstances	Your Status	Income details needed	Action you need to take
Under 25 years and living with parents / step parents / parent's partner	Dependent	Your income and your parents / step-parents / parent's partner's income	Complete Parts 1-10. Your parents / step parents / parent's partner must complete Parts 12-14. You and your parents / stepparent's / parent's partner must sign and date the declarations at Part 15.
Under 25 years living alone or with a partner; and have not been supporting yourself for three years or more before the start of the first academic year of your course.	Dependent	Your income and your parents / step-parents / parent's partner's / income	Complete Parts 1-11. Your parents / step- parent's / parent's partner must complete Parts 12-14. You and your parents / step- parent's / parent's partner must sign and date the declarations at Part 15.
Married or over 25 years on 1 September 2005, and living with a partner.	Independent	Your income and your husband's / wife's / partner's income	Complete Parts 1-9 and 11. Your husband, wife or partner must complete Parts 12-14. You, your husband, wife or partner must also sign and date the declarations at Part 15.
Under 25 years, not married; and have been supporting yourself for three years or more, before the start of the first academic year of your course.	Independent	Your income	Complete Parts 1-9. Sign and date the declaration at Part 15.
25 years or over and not living with a partner; or under 25 years and orphaned or have no contact with your parents / step parents. Please see page 2 of Guidance Notes.	Independent	Your income	Complete Parts 1-9. Sign and date the declaration at Part 15.
PGCE Students	Independent	None	Complete Parts 1-4, 6, 8. Sign and date the declaration at Part 15.

If you are not sure whether you are an 'independent' or 'dependent' student, please contact the EU Team for advice before completing this form. Send your form to the EU Team with any evidence asked for before the deadline dates shown overleaf.

What happens next

Your application form, EU5N, will be acknowledged and will be dealt with as soon as possible. It may take up to forty working days before we are able to let you know the outcome. Please do not write, fax, telephone or e-mail us to ask about your claim during this period, as this will delay the application process.

education and skills

	 V02/01/2005
Date of Issue	EU5N

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Confidential

_	DfES USE ONLY		Dat	e received	Initials			
DfES num	per EURS / 05 /							
			Date	documents copied/retur	rned Initials			
				/ /				
	Tick this box if you do not wish a financial asset (for example, because the income is too high). If you fee appropriate to a home student - £1,175 for according please complete parts 1-4, 6-8 and 15 of the form.	ou choo	ose this option you	will be charged the tuiti	on 14			
Part 1	art 1: Your personal details - you must be a national of a European Union (EU) country (i.e., an EU National) or the child of an EU National							
1	Your title (tick one box only)	8		you <u>must</u> send <u>certified</u> dence with this form).				
	Mr Mrs Miss Ms							
	Other							
2	Your surname/family name (in full)	9	Your sex		⁻ emale			
		10	Your date of birth	(DD/MM/YYYY)				
3	Your first names (in full)							
		11	Country of birth					
4	Surname at birth (if different from 2 above)	12	District of birth					
		13	If you have an ad	Idress in the United King	ndom (UK)			
5	Your normal permanent address (not your university or college address)		•	ntact you, please give d				
				Postcode				
				1 0010000				
	Country		Telephone Number					
6	Your e-mail address (Please write clearly)		Date from which y be contacted at the address	_				
7	Your normal permanent address phone number (including country and area code)			nplete a date here corre ormal permanent addre				

European Union Students: APPLICATION FOR TUITION FEE SUPPORT FOR ACADEMIC YEAR 2005/2006

EU5N — 0ver

Part 1	: Your personal details (continued)
14	Are you: single? married? separated? divorced? widowed? living with a partner? Date married/entered into a civil partnership/separated/divorced/widowed/started living with partner (DD/MM/YYYY) Send a certified copy of the relevant certificates or other evidence confirming this.
Part 2	: Residence details
imme	must have lived within the European Economic Area (EEA) or Switzerland throughout the three years ediately before the first day of the first academic year of the course for which you are seeking help with ees (proven temporary absence outside the above areas will not affect your entitlement). How long have you lived at the 'normal permanent address' you gave in Q5? Please give the number of years and months in the boxes below. Years Months If this was for less than four years please give full details of your previous address(es) below.
	From To Your address (including country) (DD/MM/YYYY) (DD/MM/YYYY)
17	Has your residence for any of the three years immediately before the first day of the first academic year of your course been outside the EEA or Switzerland? Yes You will need to provide full details and documentary evidence regarding your absence. You will only be eligible if you can prove to us that your absence was temporary.

18 Was your residence in the EEA or Switzerland wholly or mainly for educational reasons?

	Yes No	Stu	dent	Spou Pare step-p	ents
		Yes	No	Yes	No
9	Are you, your husband, wife, civil partner, parents, step-parent or parent's partner an EEA or Swiss national and currently working in the UK?				
	If you are currently employed, are you going to continue working while you are studying?				

If you have answered yes to either of the two questions above, have you applied to your Local Education Authority (LEA) for any financial help?

If yes, please give details below and enclose a copy of the LEA's response.

2 ------ ove

Part 3: Your parents'/step-parents' or parent's partner's details

	Diagram with the full				/ tl t			
20								
		Father's/Step-fa	ather's/Mother's Par	tner's details	Mother's/Step-n	nother's/Father's	Partner's details	
	Nationality							
	Please Note: If yo	<u>u</u> are not an El	J national, please pro	ovide officially cer	tified evidence of	f your parents' EU	nationality.	
	Family name/							
	Surname							
	First name							
	Address							
		Country			Country			
	Date moved to this	s address						
	(DD/MM/YYYY)							
Part	4: Previous ed	ucation						
21			e or sandwich course d the course. This sh					
	Title of the o			College/Universi		Date you	Date you	
	(for exam BA Histo		(Please	(Please include Country)		started (MM/YYYY)	left (MM/YYYY)	
22	If you did not finist verify this.	sh any higher ed	ducation course in the	e UK, please tell ι	is why and provi	de a letter from the	e institution to	
23			support for any of the for fees) from any or		Question 21 (for	example, a grant	or loan, tuition	
	Yes ▶	Give details bel	ow. (If you need to, c	ontinue on a sepa	rate sheet and a	ttach it to the back	of this form).	
	No							

______ 3 ______ over ▶

Part 5: About your employment and unemployment history

24	In date order, please give your employment history since you left school, up to the present. If there are periods when you have not worked, please give the reason (for example, you were registered							
	unemployed, on a long holiday separate sheet.)	y, raising a family)	, and the appropriate	dates. (If you need to,	continue on a			
	Name and address of your employer or benefit office	Full time or part time?	From (DD/MM/YYYY)	To (DD/MM/YYYY)	Amount of salary, wages or benefit you have received (state whether it was weekly, monthly or yearly)			
	Please Note: If you are under before the first day of the first documentary evidence covering the state of th	academic year of	•	•				
Part 6	6: About your course							
	must complete this section eventher that the section explied to several universections.	-		•	e. If			
25	Name the university or college the name of the college first, for				f a number of colleges, give us ollege, University of Durham).			
26	Give the UCAS code of the un Wolverhampton University is V		-		vw.ucas.com).			
27	Franchised courses. If the co			from the university or o	college providing the course,			
28	Full Course title (e.g. History)	and Qualification (e.g. BA)					
20	City the LICASYCTTP course	anda for avample	Low is M400					
29	Give the UCAS\GTTR course (refer to your acceptance lette	· ·						
30	Date you will start or started yo	our course.		(MM/YYYY)				

Part 6: About your course (Continued)

31	Do you intend to complete the course and obtain the UK qualification?							
	Yes No							
32	Date when you expect to finish your course and obtain the UK qualification. (MM/YYYY)							
33	How long does your course last in total? years							
34	Which year of the course are you studying in the academic year 2005/2006? (Tick one box only.)							
	Foundation year? First year? Second year? Third year?							
	Fourth year?							
35	Is your course (tick one box only):							
	full time? part-time? full time involving a placement (sandwich course)?							
	part-time ITT? If you ticked part-time ITT or flexible postgraduate ITT, please give the number of weeks you will be studying full time and the number of weeks you will be on full-time teaching practice in the academic year							
	a flexible postgraduate ITT? 2005/2006.							
	Full-time study weeks							
	Full-time teaching practice weeks							
36	If you will be undertaking a period of work experience away from your institution, or overseas study during your course, please give the dates involved. If you are undertaking more than one period of work experience, or overseas study during your course, please give full details and dates involved on a separate sheet.							
	From							
37	You must complete this question. Have you been accepted onto the ERASMUS/SOCRATES exchange placement scheme for 2005/2006?							
	No							
	Yes Complete the dates in the two boxes below and then go to the declaration at Part 15.							
	From							
Part 7	7: Other information							
38	Have you been awarded a state-funded place on a dance and drama course at a privately-funded institution?							
	Yes Send us the official letter offering you the place.							
39	Have you applied, or will you be applying, for any income-assessed bursary or award for the academic year 2005/2006, from the National Health Service (NHS) or the Department of Health (DoH)?							
	Yes Send us the letter showing the result of your application as soon as possible, as this may affect the level of support you are entitled to.							

______ 5 ______ over 🕨

Part 8:	PGCE/ITT or Private Ins	stitutions							
	 Tick here if you are studying a: postgraduate certificate in education (PGCE) or postgraduate initial teacher training (ITT) then go to the declaration at Part 15. Tick here if you are attending or planning to attend a private institution then go to the declaration at 								
	Tick here if you are attending Part 15.	ng or planning to att	end a private instituti	on then go to the dec	laration at				
Part 9:	Student's estimated inc to 31 August 2006. Mus			e academic year 1	September 2005				
	Do you expect to receive any state benefits, scholarships an		-						
	Yes Please give details below (you must also send certified documentary evidence as soon as possible). When we assess your claim, we may be able to take into account any sum paid by you in relation to a private pension. If you have any such financial commitment, please give details on a separate sheet of paper, showing the gross amount payable and the name of the pension provider. You will also need to send certified documentary evidence of the agreement.								
	No The Depar	tment may ask for ev	vidence to show you	have been rejected for	or student financial aid.				
	If Yes, please give details belo	w.							
	Source of income		en will it be paid? (ple	·	Total gross income for the year, in the currency in				
		In one instalment	one instalment Weekly Monthly		which it will be paid				
				Total					
	e note that your application v				dence required. If the				
Part 10					ompleted by ALL				
	single students under		(11.11)	.,,					
	are under 25 years at the star al, step or adoptive parents.	t of the academic yea	ar, you or your parent	s should answer this	part. This includes				
41	Are your parents:								
	single?	married?	separated?	divorced?	widowed?				
	living together?	both deceased?		*					
	remarried?		Date separate	ed/divorced/widowed	(DD/MM/YYYY)				
	If your parents are separated/o		end an officially certi	fied copy or the origin					
	Original documents will be retouted or parents are divorced or	·	rent do vou normally	live with?	BQ				
		ther	,						

______ 6 ______ over ▶

Part 11: About your husband/wife or partner - to be completed by ALL married and co-habiting students.

		Husband's, wife's or partner's details
43	Surname	
44	First name	
45	Address	
		Country
		Postcode
Part '	12: Parents'/step	p-parents'/parent's partner's,/husband's/wife's or your partner's financial details
46	Current occupation	
		Father/Step-Father/Mother's Partner/Husband/ Mother/Step-Mother/Father's Partner/Wife/ Your Partner Your Partner
	Occupation	
	Employer	
	Employer's	
	address	
		Postcode Postcode
47		provided documentary evidence of income details to the EU Team for financial year 2003 or r dependent student?
	Yes	Student's full name
		DfES reference number E U R S
	No 🕨	Go to question 48.

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Part 12: Parents'/step-parents'/parents' partner's/husband's/wife's or your partner's financial details (continued)

	Answer every question and enter an amount, 'None' or 'N/A' when income (before deductions) received for the last full tax year, and tell			8/9
	Type of income and evidence we need	Father / Step-Father / Mother's Partner	Mother / Step-Mother / Father's Partner	Husband, wife or partner
			ual amount, in the c	currency
48	Gross income from all employment (before deductions) Send certified documentary evidence of the amount.			
49	Income from self-employment, including business profits. Send certified documentary evidence of the amount.			
50	Taxable Benefits in kind (e.g. company car, private health scheme etc). Send certified documentary evidence of the amount.			
51	State benefits (including disability benefits). Send certified documentary evidence of the amount.			
52	Income from property lettings or rent. Send certified documentary evidence of the amount.			
53	Income from pensions, any other benefits or allowances. Please giv details below, and amount received. (Do not include child benefit). Send certified documentary evidence of the amount.	е		
54	Bank and building society gross interest (before tax). We may ask for evidence.			
55	Any other type of income including trusts and similar income. Put the type of income below, and amount received. Send certified documentary evidence of the amount.			
Part 1	3: Deductions - to be completed by the student's parents/s wife, or your partner.	tep-parents/parer	nt's partner/husba	nd/
befor	a are paying contributions to a private pension scheme, please show the student's year of study. You must write in the amounts. Do not we write 'none' in the relevant box.	•	•	
		Step-Father / Mother's Partner	Step-Mother /	Husband, wife or partner
			ual amount, in the on which it was paid	currency
56	Private pension contributions you have paid in last full tax year.			
	se note that your application will be delayed if you do not send all ence you provide is a copy of the original, it must be <u>correctly</u> cer		ry evidence required	d. If the

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Part 14: Dependent's details - to be completed by ALL students

		<u> </u>	<u> </u>						
57	Are there any children who will be wholly or mainly financially dependent on you or your natural or adoptive parents/step-parents/parent's partner/husband/wife or your partner in the year 1 September 2005 to 31 August 2006? If any of those dependants are in receipt of tuition fee assistance from this Department or a Local Education Authority please quote their reference number under their name below.								
		Yes Please give details below and send official documentary evidence with this form. Continue on a separate sheet if necessary.							
		necessary.						Who is person de	
		Full name	Date of birth (DD/MM/YY)	School or occupation	Estimated income		ountry of udy/work	on (i.e. p	parent,
			/ /						
			/ /						
Part 1	5:	Declarations							
supp	ort	read the following declarations tunless you, your parents/stepte the relevant parts.						sign	9
Dec	ara				pand/wife or your pa	artn	er must sig	n this decla	ration
Α	ΑI	l applicants must sign this dec	claration.						
	<u> </u>	The information I have given of	on this form is comp	olete and accurat	e, to the best of my	knov	vledge and	belief.	
	-	I will tell the EU Team immedia	ately if my circumst	ances change in	anyway that might a	ffect	my entitler	ment for sup	oport.
	<u> </u>	I understand that if I give the E financial assistance, or I may			- ·	info	rmation, I r	may be refu	sed
	<u> </u>	I agree to supply any further in	formation that the	EU Team may as	k for.				
	<u> </u>	I will tell the EU Team immedia	ately and provide o	fficial proof if, in	any year of my cours	se:			
		 I am absent from the cours 	e for more than 60	days, due to illne	ess;				
		 I am absent for any other re- 	eason;						
		□ I leave, abandon or am exp	pelled from the cou	ırse;					
		 I stop attending the course 	and I do not intend	I to, or I am not a	llowed to, return for	the r	est of the a	cademic ye	ear;
		I transfer to a different coul	rse at the same, or	a different, unive	rsity or college; or				
		□ I repeat part or all of a year	of my course.						
	<u> </u>	I will also tell the EU Team imm	mediately and prov	ide official proof	if:				
		• the month or year of the sta	art or end of my co	urse changes;					
		□ I transfer from a full-time co	ourse to a part-time	course; or					
		my home or term-time add	ress or telephone	number changes					
	a	If financial assistance is paid to back the balance.	o me, or on my bel	nalf, and is, for w	hatever reason, more	e tha	ın I am ent	tled to, I wil	ll pay
		Your name (CAPITALS)		Your sig	nature			Date	
								/	

over

Part 15: Declarations (continued)

Name

(CAPITALS)

Declaration by the parent or parents/step-parents/parent's partner/husband/wife or your partner (as appropriate).



- The information I have given on this form is complete and accurate, to the best of my knowledge and belief.
- I / We will tell the EU Team immediately if my circumstances change in any way that might affect this application for support.
- I / We agree to supply any further information that the EU Team may ask for.
- I understand that if I give the EU Team false information, or do not give the EU Team complete information, I may be prosecuted and the financial assistance withdrawn.

Name

(CAPITALS)

Enclosed all relevant documents and evidence.

, _		,	
Signature		Signature	
Relationship to student		Relationship to student	
Date		Date	
Before you send the EU Team this form, please check you have done the following.			
Fully answer so, it will del Marked any not apply to husband/wife	uidance Notes sent with this form. red all relevant questions. (If you do not do lay your application). questions with either 'None' or 'N/A' that do you or where relevant your parents/ e or partner/step-parents/parent's partner. dated this form at Part 15.	offering Drama of concerning National bursary. Enclosed you document ship	e, enclosed a letter: you a State-funded place on a Dance and course; or ing the outcome of your application for a Health Service/Department of Health ur original/officially certified copy of a owing your full name at birth and date, untry of birth and nationality.

Data Protection Act 1998

The following statement describes who will use the information provided on this form.

If we need more information or any other documents, we will let you know.

The information you, your partner or relatives provide on this form will be used for the purpose of processing your application for assistance with tuition fees. The Secretary of State for Education and Skills has transferred certain functions relating to your application to Higher Education Institutions (Colleges and Universities) and the Student Loans Company who also exercise certain functions on his behalf.

The Department for Education and Skills (the Department) requires information provided on this form to assess your eligibility for assistance with your tuition fees and to determine the maximum amount of support for which you are eligible. The Department may also use information provided on this form for statistical purposes to monitor the performance of the student support system and to inform future policy. The Department will not identify individuals from this data for such purposes. The Department may also share information with a Local Education Authority (LEA) if you have a sibling who has applied to them for support or if you are eligible to be considered for full support through an LEA.

The Student Loans Company (SLC) requires information provided on this form to process your application for tuition fee support and make payments to your College or University as appropriate.

Your College or University will receive from the SLC and the Department information provided on this form to facilitate payment of your tuition fee support.

The Department, the SLC and your College or University are under a duty to protect the public funds they handle and may use the information provided on this form to prevent and detect fraud. They may also share the information, for the same purposes, with other organisations which handle public funds.