

Non-Medical Personal Helper Registration Form

Before you fill in this form, please make the relevant number of copies that you will need to claim for the cost of your helper(s) for this year of your course.

Section A – Student details and declaration – you should fill in this section

Name Date of Birth

D	D
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M	M
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Y	Y	Y	Y
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SAAS reference number

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Are you the registered employer of the helper named below or are they self-employed? **Please tick** one of these boxes

I am the registered employer ☐

My helper is self-employed ☐

Please be aware that you/your helper must make sure that you comply with all relevant employment law and declare earnings to Her Majesty's Revenue & Customs, the Department for Work and Pensions and any other appropriate Government departments.

- As far as I know, the details on this form are complete and accurate.
- I confirm that I have received or will receive help from the helper named below.

Signature Date

D	D
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 /

M	M
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Y	Y	Y	Y
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Section B – Helper details and declaration – your helper should fill in this section

Name

National Insurance number

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SAAS reference number (if you are also a SAAS-funded student)

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Address, including postcode:

Email address

Phone number

Do you work for any other student that SAAS-funds?

Yes ☐

No ☐

If 'Yes', please give their names and SAAS reference numbers below.

Please tick one of these boxes

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Declaration

SAAS will use the information you have given us in this form for the purpose of processing this claim. Further information on how we collect, hold and process your information can be found at <http://www.saas.gov.uk/data-protection>. We have a duty to appropriately manage public funds and we will use the information provided on this form for the prevention, detection, investigation and reporting of crime, including Fraud. We will share this information with other bodies for these purposes.

- As far as I know, the details on this form are complete and accurate.
- I confirm that I have helped or will help the student named above.
- I understand that the information I have provided will be used for the prevention detection, investigation and reporting of crime and I understand SAAS will share this information with other bodies for these purposes.

Signature

Date

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You can send us this document using the 'Document Upload' service in your SAAS Account if you have an online application for full time support this year. We CANNOT accept documents by post. If you have issues using the Document Upload service, please send this document to SAAS_4@gov.scot.