

Travel Fund Application Form 2008-2009



Private and Confidential - Financial Assessment Form

Please ensure you read the guidance notes before you complete this form. If you require any assistance in completing this application please contact the Student Support Finance Team on the number at the bottom of the page.

Under which travel banding do you wish to apply? (Please circle) A B C (Please see guidance notes)

1. Personal Details (Please complete in BLOCK CAPITALS and answer ALL questions)

First Names (in full):	Surname / Family Name:
Title: Mr / Miss / Mrs / Other:	Male <input type="checkbox"/> Female <input type="checkbox"/>
Date of Birth:	Age on 31st August 2008:
Home Address:	
	Post Code:
Home Tel:	Mobile Tel:
Are you in Local Authority Care? Yes <input type="checkbox"/> No <input type="checkbox"/>	
What is your nationality?	Which country do you normally live in?
If you have lived overseas please give the date you entered the UK:	
Do you have any immigration restrictions on the length of your stay in the UK?	

2. Course Details

Full Name of Course:	Full Time <input type="checkbox"/> Part Time <input type="checkbox"/>
When does your course start?	When does your course end?
Which site are you studying at? (Please Tick)	
<input type="checkbox"/> Lansdowne <input type="checkbox"/> Lansdowne Media Centre (LMC) <input type="checkbox"/> Knighton Heath <input type="checkbox"/> Constitution Hill <input type="checkbox"/> Fulcrum Centre <input type="checkbox"/> North Road <input type="checkbox"/> Redlands	
Are you... (Please Tick)	
<input type="checkbox"/> An Apprentice/Advanced Apprentice/Young Apprentice? <input type="checkbox"/> A New Deal Participant? <input type="checkbox"/> In receipt of any other government funding to help you access College? (Not including EMA/ALG) <input type="checkbox"/> None of the above	

3. Travel Details

Means of Travel	Travel Pass (Please Tick)	Travelling From (Exact Stop Needed)	Travelling To (Exact Stop Needed)
Wilts and Dorset Bus			
Yellow Bus			
South West Trains			
Car (Please complete section 7)			

4. Education Maintenance Allowance (EMA) / Adult Learning Grant (ALG)

Have you applied for an EMA? Yes <input type="checkbox"/> No <input type="checkbox"/>	Have you applied for an ALG? Yes <input type="checkbox"/> No <input type="checkbox"/>
Would you like to be sent an application pack in order to apply for an EMA / ALG? Yes <input type="checkbox"/> No <input type="checkbox"/>	

5. Council Tax

Can you tell us which Borough/District your council tax is paid to: _____

Please include a copy of your latest council tax notification. All pages must be included.

6. Status Prior to Joining Your Course (Please tick your status prior to starting the course)

- | | | |
|---|---|---|
| <input type="checkbox"/> School Leaver | <input type="checkbox"/> Employed - Full Time | <input type="checkbox"/> New Deal Candidate |
| <input type="checkbox"/> Student - Please state where and what course:
_____ | <input type="checkbox"/> Employed - Part Time | <input type="checkbox"/> Other (Please specify) |
| | <input type="checkbox"/> Apprentice | |

7. Evidence of Income

Travel Banding	Evidence Required (Please tick)	Have you included in with your Student Support Fund application? (Please circle)	Is the evidence included with this application (Please circle)
ALL	<input type="checkbox"/> Most recent Means Tested Benefit letter received <input type="checkbox"/> 2 months bank statements (If benefits letter dated over 6 months from application) <input type="checkbox"/> P60/Self assessment form	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>

8. Exceptional Circumstances

If you are unable to use public transport and need to apply for travel assistance with fuel costs please tell us why. This section MUST be completed if you wish to apply for petrol assistance.

9. Data Protection Act 1998 and Declaration

The information you provide on this application form will be used for the purposes of supporting your education through the provision of funding via the Bournemouth and Poole College's Student Support Fund. It will be disclosed internally within the college and externally to the Learning and Skills Council. The Council will collect and share this information with other organisations for the purposes of administration, careers and other guidance, statistical and research purposes. In signing this application form you give your consent to the use of your personal data in this way.

I certify that all the information given above is correct and I understand that the College has the right to reclaim any funding if I am found to have provided incorrect information or do not complete my course

Signature of Student:

Date:

Signature of Parent/Guardian (if under 19):

Date:

10. Checklist Once you have completed all sections please complete this checklist before returning this form.

Have you completed all sections of this form? Yes No

Have you included the relevant income evidence? Yes No

PLEASE RETURN COMPLETED FORM IN THE INCLUDED SELF ADDRESSED ENVELOPE.

For Office Use Only

Site of study:	Date received:	Band:
Enrolment confirmed:	Evidence with SSF application:	Copy of evidence attached:
Assessed by:	Date:	