   

**Cardiff Trust Fund**

**for Higher Education Students**

Application Form 2015-16

Further information about this Trust Fund, including terms and conditions, is available at <https://intranet.cardiff.ac.uk/students/support-and-services/money/care-leavers-money-support>

All applicants must read this information prior to completing and submitting this form

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| **PERSONAL DETAILS** (PLEASE PRINT CLEARLY IN BLOCK CAPITALS) |
| **Student Name** |  |
| **Student ID Number** |  |
| **University**  |  |
| **Contact email** |  | **Contact phone number** |  |
| **Term time address** |  | **Home address** |  |
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|  |  |
|  |  |
| **Course title** |  | **Year of Course** |  |
| **Category of applicant** | **Estranged student** | **Asylum seeker** | **Work Placement costs**  |
| **Please tick which category you are applying under** |  |  |  |

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| **FINANCIAL INFORMATION** |
| How much support do you require? *(Please note that this is for assessment purposes only. Any grants given will not necessarily reflect how much you indicate here).* |
| £ |
| Please give full details of all of your income and expenditure in the current academic year, including how you fund your tuition fees and your living costs during your course. You should submit supporting documentation of all funding awards and also your latest monthly bank statements for all of your bank accounts, including savings, ISAs and current accounts. *(Please continue on a separate sheet if required)* |
| **All income (e.g. student loan, grants, wages, family support etc)** | **Expenditure (e.g. rent, course expenses)** |
| **Further Information to support your application** |
| Please provide us with relevant information about your background in support of your applicationInclude brief details:* Of your claim for Asylum if applicable. You should provide a copy of home office documentation that shows your current status
* Or details of the estrangement including any relevant supporting evidence such as housing benefit awards during 6th form or a supporting statement from an independent professional aware of your family circumstances, for example a social worker or teacher.
* Or provide details of your placement including costs if applicable

*(Please continue on a separate sheet if required)* |
|  |
| Please provide details of your recent academic history (grades in last university exams or A level results if no university exams taken)  |
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| How will gaining a grant from this Fund make a difference to you? |
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| What do you hope to do once you have finished the course? |
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| Declaration | * To the best of my knowledge, the information provided on this application and all supporting evidence is accurate and complete.
* I agree to the terms and conditions as stated on the website at [URL].
* I understand that my details will be kept in accordance with the Data Protection Statement below.
* I accept that I may be required to participate in related publicity activity.
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| Signature |  |
| Date |  |

Please return the application form to:

**Sheila King, Advice & Money Team, Student Support Centre, 50 Park Place, Cardiff, CF10 3AT**

Closing Date: 4th January 2016

**Data Protection Statement**

All personal details will be held in accordance with the Data Protection Act 1998. The information provided in this application form and any documents submitted may be used by staff from the University of South Wales, Cardiff University, Royal Welsh College of Music and Drama, Cardiff Metropolitan University, Cardiff Trust Fund for Higher Education Students. All of the above may have access to your application for making decisions, auditing purposes, and for agreed marketing purposes and any related research.