

DSA1 Form

Application for Disabled Students' Allowances

2020/21



Who should complete this form

Before completing this form, you should read the Privacy Notice on page 13 of the accompanying notes.

What type of course are you/will you be studying?

Full-time undergraduate course

Have you applied for other student finance (Maintenance Loan or Tuition Fee Loan)?

Yes – You should complete a DSA Slim form

No – You should complete this form

Part-time undergraduate course – Complete this form

Postgraduate course – Complete this form

Postgraduate healthcare course

Are you professionally registered in the subject you are/will be studying?

Yes – You should not complete this form

No – You should complete this form

You can download a DSA Slim form from www.gov.uk/studentfinance.

If you're a full-time undergraduate student and you want to apply for other student finance as well as DSAs, you should complete a student finance application form and a DSA Slim application form, both are available to download from www.gov.uk/studentfinance.

Application deadline

You should return your application as soon as possible and no later than 9 months after the start of your academic year. See page 8 of the DSA1 notes for academic year dates. If you are unable to return your application by this date use the 'Additional notes' page at the end of this form to tell us why.

You can order forms and guides in Braille, large print or audio. For more information on how to do this please refer to the notes.

How to get Disabled Students' Allowances (DSAs) in 3 easy steps

Apply for DSAs

Complete all sections in this form, and return it with all the evidence we need. The sooner we receive your completed form with all evidence the quicker we'll be able to tell you if you could get DSAs.

Make sure you sign and date the terms and conditions at the end of this form.

Find out exactly what equipment and support you need

If you are eligible for DSAs you may need to attend a Study Needs Assessment to make sure you get the right specialist equipment and/or services to help you complete your course. If you need to attend a Study Needs Assessment we'll send you a letter to tell you how to do this.

If you do need to attend a Study Needs Assessment the Assessment Centre will send us a report. This will recommend equipment and other support you may need, how much it will cost and who can provide it. You will also receive a copy of this report. We will review their recommendations and make our final decision.

This process can take some time – make sure you book your Study Needs Assessment as soon as you get our letter so that you can get all the necessary equipment and support before your course starts.

Get your equipment and support

We'll send you a DSA entitlement letter to tell you what equipment and other support you will receive DSAs for. The letter will also provide instructions on how to arrange delivery of your equipment and/or arrange other support. Don't buy or arrange equipment or support before you receive your DSA entitlement letter because we won't be able to reimburse you for these costs.

- Mhere you see this icon you should check the guidance notes for help to complete a question.
- Where you see this icon you need to send evidence with your application. Use the guidance notes to find out what you need to send.

You may be eligible for a bursary or scholarship. In order for a university or college to determine and pay any bursary or scholarship to which you may be entitled, we will share some of your personal, financial and course details as well as information about your eligibility for student finance with them. For more information about this, read our Privacy Notice.

Please contact the university or college if you require further information about their bursaries and scholarships.

Personal details



If you will be studying a postgraduate healthcare course in a discipline you're

	already professionally registered in, you should not complete this form.					
fina	ou have applied for student ance before, please provide your stomer Reference Number					
Pe	rsonal details					
a	Title	Mr	Mrs Miss	Ms		
	Forename(s)					
	Surname					
	Sex	Male	Female			
	Date of birth (DDMMYYYY) Please complete these questions with the details exactly as stated on your birth certificate or passport.					
	Place of birth (the name of the town or village)					
	Nationality n					
lde	entity evidence details					
b1	Do you hold a UK passport?	Yes	No		if no go to b3	
b2 Provide the following details from your UK passport, which must be current valid and not expired (this is the easiest way for you to verify your identity a means you do not need to send us your passport). We will share the passport details you provide with HM Passport Office to					r identity and	
	confirm that they're valid.	s you provid	ie willi i iivi Fa	ssport C	JIIIC e lO	

If your passport is not valid or has expired go to b3

Passport number	
Forename(s)	
Surname	
Date of issue (DDMMYYYY)	
Date of expiry (DDMMYYYY)	

Personal details

b3 Send your original non-UK passport or Biometric Residence Permit; ☐ or Send your original UK birth or adoption certificate and a completed Birth/Adoption Certificate form. ☐

Previous loans

Yes	No if no go to d1
Yes	No

Armed Forces

d1 Are you a member of the Armed Forces serving outside England?

Yes No

d2 Are you a family member of someone in the Armed Forces serving outside England? (for example: spouse or child)

Vaa	Ma	
Yes	No	

Contact details

e Please give your current home address. If you know it, please also give your term-time correspondence address.

Home address	Term-time address
Postcode	Postcode
Home phone number	Date you will move to this address (DDMMYYYY)
Mobile phone number	
Email address	

The DSA team may contact you by email, so please put your main email address.

Section 2 Other financial support

Bursaries and awards

If you are an **undergraduate student** in this academic year will you be eligible to apply for

a1 A Department of Health or NHS Bursary (excluding the Social Work Bursary paid by the NHS Business Services Authority)

Yes No

a2 A bursary from Student Awards Agency Scotland (SAAS)

Yes No

a3 A Healthcare Bursary from the Department of Health (DoH) for Northern Ireland

Yes No

If you've answered yes to any of the above questions, do not continue with this application unless you started a part-time course on or after 1 August 2018 at a university or college in England. If you're not continuing with this application, you should contact your bursary provider for advice on any extra support you may be entitled to.

If you are a **postgraduate student** in this academic year will you be eligible to apply for:

b1 A Department of Health, NHS, SAAS or other healthcare bursary

Yes No

b2 A Research Council bursary

Yes No

b3 A bursary from your college or university that includes extra support because of your disability, mental health condition or specific learning difficulty (do not count any payment you get from your university or college's hardship fund).

Yes No

c1 Are you in receipt of an NHS Business Services Authority bursary for students studying an approved postgraduate social work course that includes extra support because of your disability?

Yes No

If you have answered 'Yes' to any of the above questions in this section do not continue with this application. You should contact the provider of your bursary for advice on any extra support you may be entitled to.

Residence

Nationality

a1	Are	you a	a UK	national?	' ne
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a2 Are you an EU national?
If 'Yes', have you lived in the UK and Islands for five years before the first day of the first academic year of your course?

a3 Are you a Postgraduate student?

If 'Yes', have you lived in the UK and Islands for three years before the first day of the first academic year of your course?

a4 Are you the child of a Swiss national?

a5 Will your Swiss national parent be living in the UK on the first day of the academic year?

Yes	No if yes go to b1
Yes	No if no go to a4
Yes	No if yes go to b4
Yes	No if no go to a4
Yes	No if yes go to b2
Yes	No if no go to a6
Yes	No if yes go to b2

Residence status

- a6 Are you or your:
 - husband, wife, civil partner; or
 - parent(s), step-parent; or
 - child, step-child

a European Economic Area (EEA) national or Swiss national who is working, has worked or is looking for work in the UK?

If 'Yes', please give details below.

You should also give details of your previous studies.

If you are currently working, are you going to continue working during your studies?

If 'Yes', please give details.

Yes No

Yes

No if no go to a7

- a7 Are you the child of a Turkish worker who is working in the UK? •
- a8 Do you have 'settled status' in the UK? **n**

If 'Yes', give the date you received this status (DDMMYYYY).

- a9 Have you or your:
 - husband, wife, civil partner; or
 - parent(s), step-parent

been granted 'refugee status' by the UK Government?

If 'Yes', and if applicable, please give the following:

Home Office reference number

Date this status is due to expire (DDMMYYYY)

a10 Have you or your:

- husband, wife, civil partner; or
- parent(s), step-parent

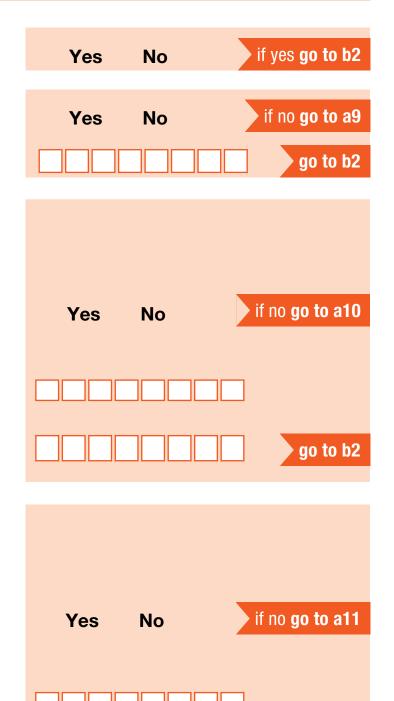
been granted

Humanitarian Protection? 100

If 'Yes', and if applicable, please give the following:

Home Office reference number

Date this status is due to expire (DDMMYYYY)



qo to b2

- a11 Have you or your:
 - husband, wife, civil partner; or
 - parent(s), step-parent

been granted 'leave to remain' as a Stateless Person?

If 'Yes', and if applicable, please give the following:

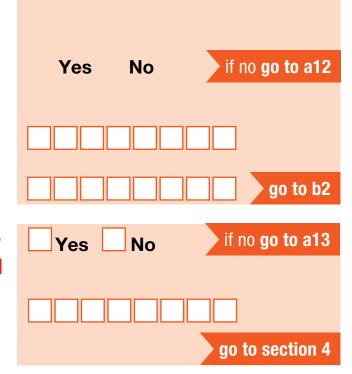
Home Office reference number

Date this status is due to expire (DDMMYYYY)

a12 Have you been granted DVILR in the UK?

If 'Yes', and if applicable,
please give the following:

Home Office reference number



in the UK under section 67 of the Immigration Act 2016, or are you the dependant child of someone who has? If 'Yes', and if applicable, please give the following:

Home Office reference number

Date this status is due to expire (DDMMYYYY)

Have you been granted 'Calais leave' in the UK, or are you the dependant child of someone who has?

If 'Yes', and if applicable, please give the following:

Home Office reference number

Date this status is due to expire (DDMMYYYY)

	go to b2
Yes No	if no go to a15
	go to b2

Yes

if no go to a14

a15 On the first day of the first academic year of your course will you be under 18 and will you have been living in the UK and islands for seven years?

Yes No if no go to a6

a16 On the first day of the first academic year of your course will you be over 18 and will you have lived in the UK for at least 20 years, or at least half of your life?

Yes No



If you answered 'No' to all the questions in this section you are not eligible for student finance from Student Finance England. Do not continue with this application.

In the three years prior to the start of the first academic year of your course, did you live outside the UK and Islands at any time?



b2 Give details of your residence for the three years before the first academic year of your course.

Full address
From (DDMMYYYY)
To (DDMMYYYY)
Why were you there?
Full address
From (DDMMYYYY)
To (DDMMYYYY)
Why were you there?

If you require further space to provide your answer, please give the details requested above on the additional notes section at the back of this form.

- b3 At any time since 1 September 2017 has:
 - either of your parents, step-parents, guardians; or
 - your husband, wife, civil partner

lived or worked outside the UK and Islands or, in the case of an EU, EEA or Swiss national, outside the EEA or Switzerland?

If 'Yes', please give details.

b4 Give details of your residence for the five years before the first academic year of your course.

; I	No		if no	go to section 4
Idress				
		$\neg \vdash$		(DDMMYYYY)
				(DDMMYYYY)
ere the	ey there	?		
				go to section 4
	Idress	Idress		Idress

Full address
From (DDMMYYYY)
To (DDMMYYYY)
Why were you there?
Full address
From (DDMMYYYY)
To (DDMMYYYY)
Why were you there?

If you require further space to provide your answer, please give the details requested above on the 'Additional notes' section at the back of this form.

About your course and university or college

In this section, please give details of your first choice university or college and course.

an	a course.		
Ur	iversity or college details		
a	University or college name and address		
		Postcode	
Co	ourse details		
b	If you are following a combined studies or modular course, list all subjects being studied.		
	Qualification you expect to gain (for example BSc Physics) Course start date (MMYYYY) Course end date (MMYYYY) Course length (years)		
	Year of course	Foundation year First year Second year Other (give details)	Third year Fourth year
	If the course is franchised to another university or college, give the address of the other university or college.		

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Postcode

About your course and university or college

Term details

where will you spend most of your time this academic year?

Term 1

University or college

Study abroad

Work placement

Term 2

University or college

Study abroad

Work placement

Term 3

University or college

Study abroad

Work placement

if you have ticked "University or college" for all 3 terms **go to section 5**

d Have you been accepted onto the Erasmus exchange scheme?

Yes

No

if 'Yes' or you'll be studying abroad **go to section 5**

About your course and university or college

Placement details

Where will your placement be?
Placement name and address if known

Abroad UK Don't know

Is the placement paid or unpaid?

lf 'unpaid' please tick which type

Postcode

Paid Unpaid

a hospital, Public Health Service Laboratory or with a Clinical Commissioning group in the UK;

a Special Health Authority, the National Health Service Commissioning Board, the National Institute for Health and Care Excellence, the Health and Social Care Information Centre, Local Health Board, Health Board, Special Health Board or Health and Social Services Board in the UK;

a Local Authority carrying out its duties relating to health, welfare or caring for children and young people, a voluntary organisation providing facilities or carrying out similar activities or a Local Authority acting in the exercise of public health functions in the UK;

the prison or probation sector or after-care services in the UK;

unpaid research in a UK or overseas institution;

an unpaid placement in the Houses of Parliament;

an unpaid placement that is not listed above.

Your university or college

Please ask your university or college to complete this section.

If you do not want to tell your university or college about your disability, mental health condition or specific learning difficulty, please read section 5 of the notes for further instructions and then go to section 6.

To be completed by the student's university or college.

Instructions for university or college

Complete this section for all students, **unless** they are on a full-time undergraduate course **and** are applying for other finance.

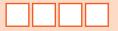
Complete the SLC or UCAS university or college code.

Tick the box that applies to the student.

Complete the university or college declaration.

To find out how we'll use the information you provide go to **www.gov.uk/studentfinance** to read our Privacy Notice before completing this form.

SLC or UCAS university or college code



Part-time undergraduate students

I confirm to the best of my knowledge and belief that:

- the student named in section 1 is studying or applying for the course named in section 4;
- the student started their course before 1 September 2012 and plans to complete the course at an average rate of study of at least 50% of that needed to complete the course, or
- the student started their course on or after 1 September 2012 and plans to complete the course at an average rate of study of at least 25% of that needed to complete the course, or an equivalent course, on a full-time basis; and
- the student's rate of study in % of the equivalent full-time course is

%

Full-time undergraduate students, (who are not applying for other finance) and full-time undergraduate distance learning students.

I confirm to the best of my knowledge and belief that:

- the student named in section 1 is studying or applying for the course named in section 4; and
- the student named in section 1 plans to complete the course on a full-time basis either attending their course or by distance learning methods.

Your university or college

Part-time postgraduate students

I confirm to the best of my knowledge and belief that:

- the student named in section 1 is studying or applying for a part-time postgraduate course; and
- the student started their course **before 1 September 2012** which will not take more than twice as long to complete as an equivalent full-time course; or
- the student started their course on or after the 1 September 2012 which will not take more than four times as long to complete as an equivalent full-time course.
- the student's rate of study in % of the equivalent full-time course is

%

Full-time postgraduate students

I confirm to the best of my knowledge and belief that:

- the student named in section 1 is studying or applying for the course named in section 4;
- this course has usual entry qualification of a first degree or higher; and
- the student will not receive an award from their institution (not including any payment from the institution's hardship fund) to meet the extra course-related costs they have to pay because of their disability.

University or college declaration

Your	full name	(in	BLO	CK (CAPI	TALS	;)
Your	signature						

Position

Your phone number (including area code)

Your email address

Date (DDMMYYYY)

University or College stamp

Your disability

DSAs information and evidence

Please give the name or diagnosis and provide photocopied evidence of your disability. See the notes for what evidence you need to send. You can also download and complete the Disability Evidence form from www.gov.uk/studentfinance



Keep all original medical evidence - you may need this later.

If you require further space to provide your answer, please give the details requested above on the Additional notes section at the back of this form.

Your disability

b Consent to share DSAs



Please mark the boxes below to give consent to the following DSAs arrangements. This will allow us to make sure you get the help you need by exchanging information with the necessary organisations. If you do not give consent it may delay any support you need.

You have the right to withdraw your consent to us processing your personal information in relation to this application form. To withdraw your consent, please contact us.

I agree that Student Finance England and the disability service at my university or college may exchange information about my application for DSAs where this is necessary to make sure I get the help I need.

I agree that Student Finance England and my DSAs Needs Assessor may exchange information about my application for DSAs where this is necessary to make sure I get the help I need.

I agree that Student Finance England and my DSAs suppliers may exchange information about my application for DSAs where this is necessary to make sure I get the help I need.

Section 7

Your UK bank or building society account details

UK bank or building society account details

The account must be in your own name and be able to accept direct credits.

Sort code

Account number

Building society roll number (if applicable)



Remember to read, sign and date the terms and conditions starting on page 20

Terms and Conditions **n**

These terms and conditions ("terms") and applicable legislation apply to all of the student finance available to students for the academic year 2020/21.

I understand that I must read the specific terms about the student finance products available because they will affect me if I apply for them at any time in this academic year.

I understand that my application for student finance may be delayed unless I sign and date these terms.

Loan Contract

 I confirm I have read and understood these terms and A Guide to Terms and Conditions available at

www.gov.uk/studentfinance

- 2. I confirm that to the best of my knowledge and belief, the information I have provided is true and complete. If it is not, I understand that I may not receive student finance, any support I have had may be withdrawn and I could be prosecuted.
- 3. I understand that student finance is provided to me by the Secretary of State for Education (the "Lender") which includes any persons acting on his/her behalf and any replacement(s) under section 23(4) of the Teaching and Higher Education Act 1998 as amended or replaced from time to time (the "Act").
- 4. I understand these terms, the Act and the regulations made under section 22 of the Act will apply to any student finance provided to me by the Lender.
- 5. I understand that "student finance" in these terms means financial support by way of grant(s) and/or loan(s) made by the Lender under the regulations.
- 6. I understand that the Student Loans Company Limited ("SLC") carries out certain functions on behalf of the Lender.

My Obligations

- 7. I understand that if I have:
 - (i) reached the age of 18 years; and
 - (ii) have entered into agreement(s) for a loan under section 22 of the Act before I reached the age of 18 years,

I am agreeing to "ratify" any and all such student loans by signing these terms. This means that I confirm I entered into agreement(s) with the Lender and agree to the terms of any such previous agreement(s). If I have reached the age of 18 and refuse to "ratify" any previous agreement(s), I understand that I will not be eligible to get any further student finance under the regulations.

8. I agree to give SLC any information they need in support of this application for student finance and to seek repayment.



- 9. I agree to tell SLC immediately if my circumstances change in any way that might affect my entitlement to student finance. I understand that if I do not do this I may not get any further payments and I may have to repay the student finance I have already received. I agree that from the date I submit my student finance application until my loan(s), together with all and any interest, penalties and charges which apply, is fully repaid I must tell SLC about any changes in my personal details (including my National Insurance number) and contact details I have provided.
- 10. I agree that if I get an overpayment of student finance, I need to repay this in full and that any overpayment may be taken from any future entitlement to student finance.
- 11. I agree that I will repay the Lender any loan(s), together with all and any interest, penalties and charges which apply. I understand that this repayment will be due by me to the Lender as a debt. If I breach any of the terms of my loan, I agree to pay any charges and penalties which apply under the Act and the regulations. I understand that I will repay my loan(s) through the United Kingdom ("UK") tax system and/or I may repay SLC directly. If I live abroad, I will repay my loan(s) to SLC directly.
- 12. I agree that any loan(s) made to me in accordance with the regulations once my application is accepted by the Lender is a/are contract(s) between me and the Lender. I understand that I am liable for my loan(s) and will be charged interest from the first payment of the loan advance by the Lender.
- 13. I agree to tell SLC if I leave the UK to live outside the UK or if for any other reason I am outside the UK tax system for more than three months.

Legal Action and Applicable Law

14. In the event of any legal action, I agree that the laws of England and Wales will apply and that the courts of that part of the UK will hear any legal action. If my address is outside the UK the laws of the part of the UK where my education provider is situated will apply and the courts of that part of the UK will hear any legal action. I agree that the Lender has the right to take legal action against me in any other court with jurisdiction.

Sharing Information

- 15. If I am in breach of these terms and/or the regulations I agree that the Lender may share information held about me and my account with third parties, including the government or a government agency of another country, who may help to locate me and/or help take action to recover any payments I owe.
- 16. I confirm where I have provided any personal information about any other person in my student finance application, I have done so with their consent.
- 17. I understand that SLC will process my personal data in line with the Privacy Notice available at www.sfengland.slc.co.uk/privacy-notice which may be updated from time to time.

Disabled Students' Allowances ("DSAs")

This section applies if I apply for DSAs this academic year.

- 18. I understand that any equipment I receive through DSAs must be used for my course of study and that I am responsible for paying any repair costs.
- 19. I understand SLC reserves the right to pay the suppliers of any approved

equipment and support directly. I will be notified if SLC will make payments directly to suppliers on my behalf.

Childcare Grant ("CCG")

This section applies if I apply for CCG this academic year.

- 20. I understand and agree that in order to receive any CCG, SLC may share my personal details and my children's details with a contracted third party who will be handling the administration of CCG on behalf of SLC.
- 21. I understand that if I do not take up my childcare, or if I change to a childcare provider who is not registered or approved, I will have to pay back any overpayment.
- 22. I confirm that neither I nor my husband, wife, civil partner or cohabiting partner have chosen to receive support for childcare from:
 - (i) the childcare element of Working Tax Credit;
 - (ii) the childcare element of Universal Credit;
 - (iii) Tax-Free Childcare; and/or
 - (iv) the NHS Bursary Childcare Allowance;

and I agree to tell SLC immediately if I or my husband, wife, civil partner or cohabiting partner does receive this support. I understand that SLC may share my personal data with HMRC to check whether I get childcare support.

Customer Reference Number Your full name (in BLOCK CAPITALS)	
Your signature (in ink)	Today's date (DDMMYYYY)

Checklist

Before you return this form please make sure that:



you've answered all the questions that apply to you



your university or college has completed section 5 (if this applies to you)



you've read, signed and dated the terms and conditions



you've included all the original evidence we need with this form



you've remembered to **keep any original medical evidence** requested in section 6, and only send photocopies



If you don't send all the evidence we need, your application may be delayed.



Remember, you don't need to send your UK passport as proof of your identity. You only need to complete your UK passport details in section 1. If you send your passport it may take several weeks before we can return it to you.



Remember to pay the correct postage.

Once you have completed this form, and signed and dated the terms and conditions, please return it to:

Student Finance England PO Box 210 Darlington DL1 9HJ

You can also return your completed form and evidence to the DSA team by email at dsa_team@slc.co.uk

Additional notes

If you are providing extra information please clearly mark what section and question the information is about.