

COLEG MORGANNWG

FCF1

FINANCIAL CONTINGENCY FUND (FCF) GRANT 2011 -2012

Please forward grant applications to the College by **19th August 2011**. There is a limited amount of funding available; applications will be considered on a first come first served basis so early application is advised. Late application may result in no grant support.

I am applying for the following (please tick relevant box / boxes):

Travel Subsidy	Meal Subsidy	Childcare Costs	Appeal
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STUDENT DETAILS

Title (Mr/Mrs/Miss/Ms)	Forenames	Surname
Address		Date of birth
	/...../.....
		Age on 01/09/11
Post Code:		
Home Telephone No:	Mobile Telephone No:	E-Mail Address

STUDENT STATUS

UK Citizen	Refugee
Exceptional leave to remain	European Union
Migrant Worker	Other (please specify)

HOUSEHOLD DETAILS

Names, ages and relationship to student of all people in household (e.g. Father, Brother)		
Name	Age	Relationship to student

COURSE ATTENDING OR APPLIED FOR

Campus (e.g Pontypridd, Nantgarw)	Course Title	Full/Part Time	1st/2nd/3rd Year

HOUSEHOLD INCOME

Recent evidence must be provided for each type of income. Please note your application will not be considered without evidence, which may mean a delay in awarding your grant. Photocopies are acceptable.

I enclose:

Two consecutive monthly payslips or four weekly payslips. (Most Recent)

Proof of all benefits received in household.

Monthly Household Income	Father £	Mother £	Partner / Spouse £	Self £	Official Use (Proof)	Official Use (yearly)
Wages						
Income Support/ESA						
Tax Credits						
Disability Living Allowance						
Incapacity Benefit (please state year commenced)						
Carers Allowance						
Pension						
New Deal or New Deal Lone Parent						
Maintenance or CSA						
Any Other Income						
Total Monthly Income	£...	£.....	£.....	£.....		

Does the STUDENT have a bank or building society account?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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OTHER GRANTS

Have you received help from the FCF fund previously	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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Have you applied for or are you in receipt of any of the following?				
Educational Maintenance Allowance (EMA)	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Assembly Learning Grant (ALG)	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Individual Learning Agreement (ILA)	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
New Deal or Modern Apprentice or CITB	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
New Deal Lone Parent	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>

Please use this section to provide any additional information that may help use assess your form accurately.

Declaration

I certify that all the information given on this form is correct and I have read the notes of guidance.

I undertake to notify the College Contact of any changes in my circumstances immediately.

I understand that giving false information, or failing to disclose all relevant information may lead to rejection of my application and renders me liable to disciplinary / legal action.

I understand that all purchases made on my behalf by the College (e.g. kits) will have to be paid for in full should I withdraw from my College course.

I understand that this application will not be considered until all necessary supporting documents have been received by the College.

I understand that if I am eligible for a grant it will only be paid to me on the condition that I achieve 80% attendance or satisfactory progress.

Student Signature **Date:**/...../.....

Parent / Guardian Signature **Date:**/...../.....

Thank you for completing this form. Please return it with all the supporting documentation to:

**Grants Section
Coleg Morgannwg
Ynys Terrace
Rhydfelin
Pontypridd
CF37 5RN**

If you require an application form in welsh or require further assistance please contact Campus Services.