

Student Services

International Student Hardship Fund

A non-repayable award scheme that helps eligible International Students in Year 2 or above, who are experiencing financial difficulties

Application Form

Do you need advice on filling in this form? If so, please contact:

or

firstpoint

Peirson Study and Guidance Centre

Tel: **01905 542551**

Email: firstpoint@worc.ac.uk

Student Union Advisers

Tel: **01905 543210**

Email: studentsunion@worc.ac.uk www.worcsu.com/helpandadvice

Completed application forms and copies of all the supporting evidence should be emailed to: moneyadvice@worc.ac.uk
PAPER COPIES WILL NOT BE ACCEPTED

Applications will take up to four working weeks to process, from the date that the completed application form & ALL supporting evidence is received –

<u>Missing evidence will delay your application</u>

You may book an email/telephone appointment with a University Money Adviser to discuss your finances or to receive help in completing the form. Appointments can be booked via firstpoint.

Before completing your application, please see the International Student Hardship Fund Guidance Notes at:

www2.worc.ac.uk/moneyadvice/international-hardship-fund

Guidance Notes include:

- Eligibility
- Step by Step Guide to completing your International Student Hardship Fund Application Form
- Details of Supporting Evidence Required and Evidence Checklist
- Guide to downloading itemised Bank Statements

ALL Supporting Evidence must be submitted with your Application Form – Missing Evidence Will Delay Your Application.

International Student Office Use: Date evidence Hardship Fund 2024-25 Date of receipt completed **Section 1: About you** (to be completed by all applicants) Surname First name **UW Student number** Title (Mrs, Ms, Mr etc.) Date of birth Age (on 1st Sept 2024) Term-time address Home address (if different from term-time) Phone **UW** email @uni.worc.ac.uk **Section 2: About your course** (to be completed by all applicants) Course title **APPLICANTS MUST BE IN YEAR 2 OR ABOVE** Length of course Date course started Years Name of UW campus / partner institution attended all or most of the time Distance from term-time address Mode of study (\checkmark): full-time part-time Miles to campus / institution attended If you are a part-time student, how many modules will you complete this academic year? **PGCE** Level of study (\checkmark) : Undergraduate Postgraduate Is this academic year of your studies (tick if applicable): Your final year? A repeat year? Unpaid? If you are on any placements this year, will they be (\checkmark) : Paid? Where will the placement(s) be located? How many placements will you be on this academic year? How long will each placement last?

Section 3: About your circumstances (to be completed by all applicants)
Do you live (✓):
Alone In shared accommodation Other (please explain in box opposite) With parent(s) / guardian(s) / family member
Section 4: About your needs (to be completed by all applicants)
Do you have a disability or medical condition (✓) Yes No
If yes, please give details:

Section 5: About your household income (to be completed by	all applicants)			
Please tick all the income that applies to you – you will be requ Guidance Notes.	aired to supply evi	dence of t	his income	e – see
Student Income	Please tick all box	es applical	<u>ole</u>	
Award/Scholarship or help from Educational Charity or Organ	nisation			
Support from Home Country				
Sponsorship				
Employment & other income – please include figures				
			e tick if r monthly	
	Amount (£)	Weekly	Monthly	
Net earnings from employment				
Parental / Family / Friend contribution				
Other eg. Savings, interest etc.				
If completed figure against "Other" above, please specify				

S	ection 6: About your expe	enditure (to be completed b	by all appli	cants)				
Y	our expenditure							
	lease complete costs of exvidence of this expenditur	xpenditure listed below that re – see Guidance Notes.	t applies to	o you – y	ou will be	required	to supply	
							e tick if r monthly	
				Amou	unt (£)	Weekly	Monthly	
		Rent / N	/lortgage					
		Tra	vel Costs					
		Ithcare Costs ie. Prescription avel Costs to Medical Appoi	-					
			Other					
If completed figure against "Other", please specify – DO NOT INCLUDE general living expenses eg. food, bills or course related costs (books, equipment)								
	ank / Building Society det	tails Society account information	for all of	vour UK a	and overse	eas accou	nts, this	
ir		ounts, Student Accounts, Sa		=				
	Name of Bank / Building Society	Title of account e.g. current account, savings account	Last 4 d	•	Maxir overdraf	_	For Office	Use
					£			
					£			
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Section 6 continued

Outstanding Debts

Please list any debts that you have and any repayment arrangements set up with creditors. You must provide proof of any regular debt repayments that you would like considered as part of your application.

Name of person / company owed (creditor)	Type of debt (e.g. utility, credit card, rent, money owed to family or friends, education)	Total owed £	Repayment arrangements. Please state amount per week or month (if no arrangement in place please state)	Please tick if you have a fixed payment plan in place and are no longer using as a source of credit. ✓

Section 7: Your Supporting Statement (To be comple Please tell us why you are applying for financial help.	
	Please continue overleaf or on a separate sheet as necessary

Your Supporting Statement continuation page	
	Please continue on a separate sheet as necessary
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Section 8 – Ban	k / Building Society details
IMPORTAN	Т
into you	re awarded money from the International Student Hardship Fund, the award will be paid ir bank / building society account detailed on your SOLE page. IF YOUR BANK DETAILS ARE ECT OR MISSING, THEN PAYMENT MAY BE DELAYED.
	submitting your application, please check and ensure that your bank account details are on SOLE, and up-date if necessary.
• Please n	ote, funds can only be paid into a UK bank / building society account.
Please complet	e:
	e checked my bank account details on SOLE and confirm that this is the account where I any monies awarded to me paid.
Signature (Type Full Name)	
Date	

IMPORTANT - PLEASE READ:

University of Worcester Money Advice Privacy Notice

We are requesting this information from you in order to process your application for help from the International Student Hardship Fund. We may also use the anonymised statistics to produce reports on the Fund and identify student need.

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Applications are only seen by staff involved in the assessment and authorisation of applications, including the University's International Office. The University's Finance Office staff see student names, numbers and bank details to enable them to make payments and it may sometimes be necessary to seek information from other University Departments such as Registry Records using your name and student number.
Please note that the University of Worcester is the Data Controller and details of how we process and retain your data including how long we retain it and your rights are detailed on: https://www.worcester.ac.uk/informationassurance/student-privacy-notice.html
The processing of this data is dependent upon your explicit consent (Article 9(2)(a)).
Please complete:
I consent to my personal information being processed in accordance with the purpose identified on this data collection form.
Section 9 – Declaration
You must sign the declaration in order for the application to be valid.
By signing you are confirming that:
 You are a student at the University of Worcester and pay tuition fees directly to the University of Worcester.
 You understand that giving false information or misleading through the omission of information may lead to rejection of your application and / or steps being taken to recover any payment made to you.
You declare that the information that you have given on this form is correct and complete to the best of your knowledge.
Signature: (type full name) Date: