



**Application for the Disabled Students' Allowance
for eligible full-time students**

2011-2012

The closing date for applications is 31 March 2012

Section A – Reference number

If you have one, please give your SAAS reference number
(this appears on all the letters we send you).

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You should fill in this form if you have a disability and face extra costs due to studying or attending your course. **Fill in the form in CAPITAL letters using a black ink.** The accompanying DSA notes give advice about the Disabled Students' Allowance (DSA) for students studying a course of higher education. **You should fill in sections A – C and section E.** If you need more information you can visit our website at www.saas.gov.uk, e-mail us at SAAS_4@scotland.gsi.gov.uk or call us on 0300 300 3135. **You can get an alternative version of our DSA literature in a format most suited to your needs. Contact us on 0300 300 3135.**

Under the Data Protection Act 1998, we will use the information you give on this form to process your application for the Disabled Students' Allowance. We have a duty to protect the public funds we handle, and we may use the information you have given us to prevent and detect fraud. We may also share this information for the same purpose with other organisations that handle public funds. You should read the DSA notes that come with this form which give more detail on who will use the information you give on your form and what they will use it for.

Who should fill in this form?

You can fill in this form if you are:

- doing a full-time undergraduate or postgraduate course that we support; or
- doing a diploma in nursing and midwifery; or
- doing an honours degree course in nursing and midwifery; and
- applying to us for your fees and/or living-costs support (loans, bursary and grants).

If you are not sure what form to fill in please read our DSA notes.

Important

Once we have confirmed that you are eligible to receive support from us, we can consider you for the DSA. This means that **we cannot process your DSA application** until we receive your application for your fees and/or living-costs support. To apply visit our website at www.saas.gov.uk and apply online.

**Student Awards Agency for Scotland
Gyleview House, 3 Redheughs Rigg
Edinburgh, EH12 9HH**

Telephone: 0300 300 3135 Website: www.saas.gov.uk Email: saas_4@scotland.gsi.gov.uk

Section B – Your personal details

Full name of the university or college you are studying at in session 2011-12

Full title of the course you are studying in session 2011-12

Title (Mr/Mrs/Miss/Ms)

First name/s

Surname

Date of birth (for example 15/12/1988)

Telephone number (including code)

 / /

Full address (including postcode) that you would like any DSA correspondence sent to

Bank details

Sort code

Account code

Section C – Your disability or learning difficulty

If you are applying for the DSA for the first time, you must send supporting evidence of your disability, or specific learning difficulty. You only need to complete this section if you are applying for DSA for the first time, or if your disability or learning difficulty has changed.

What disability or specific learning difficulty do you have?

I am dyslexic.

I have a visual impairment.

I have a hearing impairment.

I use a wheelchair or have difficulties getting around.

I have mental-health difficulties.

I have an unseen disability (e.g. diabetes, autistic spectrum disorder, epilepsy or asthma)

I have two or more of the disabilities or special needs above. (Please give the details below.)

I have a disability or specific learning difficulty that is not listed above. (Please give the details below.)

If you want to give us more information about your disability, or specific learning difficulty, please do so here.

Section D – Your support details

Please tick one of the three boxes below.

This is my first application for DSA and I have already received a needs assessment (see the DSA notes) from my college or university. (Do **NOT** list your requirements in the boxes below.) Please ensure you enclose a copy of your assessment report with this form.

This is my first application for DSA and I would like you to arrange a needs assessment (see the DSA notes) for me from an Access Centre. (Do **NOT** list your requirements in the boxes below.)

I am a continuing student who has received DSA before and I would like to claim DSA for 2011-12. (Your disability advisor should list the support you require in the boxes below. Please refer to the DSA notes for more information.) We can only pay for support that has been previously approved in a needs assessment.

Basic Allowance (small items)	Estimated Cost (£) Please enter an amount. Do not write "to be confirmed"
Total	£

Non-Medical Personal Help	Estimated Cost (£) and number of hours Please enter an amount. Do not write "to be confirmed"
Total	£

Large Items of Equipment	Estimated Cost (£) Please put an amount. Do not write "to be confirmed"
Total	£

Section E – Declaration, agreement and student consent

Please make sure that you and your assessor or disability advisor, have signed the declarations below before you send us the form. If you do not do this, we will have to return the form to you which will delay your application. We cannot accept forms signed by anyone other than your assessor or disability advisor.

The assessor or disability advisor at the institution you currently attend/are planning to attend must fill in this section.

I can confirm that in my opinion, any support that is set out in this claim is essential for this student to complete his or her course and to my knowledge, the details on the claim are correct.

Name of institution _____ Official Stamp

Name of assessor or disability advisor (print) _____

Signature of assessor or disability advisor _____ Date ____ / ____ / ____

You must sign and date this section.

Payments of Disabled Students' Allowance are made under the Students' Allowances (Scotland) Regulations 2007 (as amended).

- As far as I know the details I have given on this form are complete and accurate.
- I need to spend the amount shown in this form, or which is shown in my needs assessment report, so I can complete my course.
- I will tell you immediately if my circumstances change in any way that might affect any amount which I have received, or had paid on my behalf.
- I understand that if I give you false information, or do not give complete information, you may prosecute me and withdraw the support.
- I agree to repay any amount which I have received, or had paid on my behalf, which is more than the award due to me.

We may prosecute you if you give false information.

Your signature _____ Date ____ / ____ / ____

You must read this section.

Getting DSA support will be quicker and easier if you agree to the statement shown below. We **strongly** advise that you tick the check box, but you do not have to: we will process your application regardless.

I agree that SAAS, the disability advisor at my institution or college, and my DSA assessor may exchange information about my application for the DSA, or other disability related support, where this is necessary to assist in providing me with the disability support I need.

Check list - have you:

- Applied for your main support (i.e. tuition fees and/or living cost support)
- Included evidence of your disability (if this is the first time you have applied for DSA)
- Included a copy of your needs assessment (if it has already been carried out)
- Got the form signed by your disability advisor
- Filled in sections B and C and signed the form on page 4
