

# Disabled Students' Allowance (DSA) application 2025-2026

The closing date for applications is 31 March 2026.

DSA is a fund to support disabled students and those with additional learning needs who are studying higher education and may have extra costs because of their impairment.

For more information or alternative formats, visit [www.saas.gov.uk](http://www.saas.gov.uk), email us at [SAAS\\_4@gov.scot](mailto:SAAS_4@gov.scot) or call us on 0300 555 0505.

You can fill in this form if you are:

- doing a full-time undergraduate or postgraduate course that we support
- doing a diploma or degree in nursing and midwifery
- applying to us for your tuition fees, loan, bursary, and any applicable living-cost grants

**You should complete sections 1 to 4 and your advisor should complete sections 5 and 6. Any missing information may delay your application.**

If you are unsure what form to fill in, visit the [DSA guide](#) on the SAAS website.

**If completing this form by hand, use black ink and BLOCK CAPITAL LETTERS and tick the boxes that apply.**

## Section 1 – Reference number

If you have previously applied for funding, including tuition fees only, enter your **8-digit SAAS reference** number shown on your award.

## Section 2 – Your course details

Name of your college or university

Title of your full-time course

## Section 2 continued – Your personal details

Title                      Mr            Mrs            Ms            Miss            Other

First names

Last name

Date of birth

**Bank Details** - Provide the bank account details where you want us to pay your DSA, even if you have already given us bank account details on your main funding application.

Sort code

Account number

## Section 3 – About your disability or learning difficulty

For this section, tell us about your disability or learning difficulty. You can choose more than one option and there's an extra page at the end of the form to provide more information.

If you're applying for DSA for the first time, you should send evidence of your disability or specific learning difficulty. For example, a letter from your doctor or an educational psychologist's report.

**What disability or specific learning difficulty do you have? Please tick all that apply.**

☐ I have a learning difficulty

☐ I have a social or communication impairment

☐ I have a long standing illness or health condition

☐ I have a mental health condition

☐ I have a physical impairment or mobility issues

☐ I have a hearing impairment

☐ I have a visual impairment

☐ My disability is not listed

☐ I have multiple disabilities

## Section 3 continued – About your disability or learning difficulty

Using the space below, please give us more information about your disability or specific learning difficulty.

## Section 4 – Student declaration and agreement

Sign and date this section.

We make payments of Disabled Students' Allowance under the Students' Allowances (Scotland) Regulations 2022 (as amended)

- all the information I have entered and submitted on this form is complete and accurate, to the best of my knowledge
- I will give SAAS any additional information or documents it may request to help SAAS process my application
- I will inform SAAS if my circumstances change that might affect any amount I have received, may receive, or had paid on my behalf. This includes getting public funding from elsewhere, not enrolling, or withdrawing from my course
- I understand that if I give SAAS false, incorrect, or incomplete information or my conduct is otherwise unsatisfactory, SAAS may withdraw my funding and I may be prosecuted and SAAS would seek repayment of any sums received to which I am not entitled
- I will repay any amount which I have received, or had paid on my behalf, which is more than the award that was due to me
- I need to spend the amount awarded, so I can complete my course
- I will send you receipts for all items that I purchase under the DSA
- I understand that the information I have provided will be used for the prevention, detection, investigation and reporting of crime and I understand SAAS will share this information with other bodies for these purposes

**Sign (or type name if submitting electronically)**

**Date**

## Section 5 – Your support details

**Your advisor should complete and sign this section with you.**

Please tick one of the 4 boxes below.

This is my first application for DSA and I have already received a needs assessment.

This is my first application for DSA and I would like to arrange a needs assessment.

I have been assessed, but I require a new needs assessment.

**Ask your disability advisor to send a covering letter explaining why you require a new needs assessment.**

I am a continuing student for 2025/26. I have received DSA before and have an approved needs assessment.

## Recommendations

Your disability advisor should complete the recommendations below.

- use amounts, do not enter 'to be confirmed'
- continue on a separate sheet if required

## Large items of equipment

I have included an itemized quote and recommend all items.

Estimated cost £

## Non-Medical Personal Help (NMPH)

Non-Medical Personal Help (NMPH) support type	Provider / employed helper	Hourly rate, including VAT	Hours per week	No. of weeks support required	Estimated cost
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**Estimated total cost**

## Section 5 – Recommendations continued

Basic allowance for small items	Estimated cost
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### Travel expenses

Starting location

End location

Return journey starting location

Cost per return journey

Number of return journeys per week

Number of weeks travel required

Total cost

**If you're claiming taxi costs, include 2 taxi quotes or university/college contract quote.**

## Section 6 – Declaration

**This section should be filled in by your assessor or disability advisor.**

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

Where a student is employing their own helper, I have discussed the available guidance with the student and I am happy that the non-medical person is suitable to undertake this role.

Name of the assessor or disability advisor

Phone number of the assessor or disability advisor

Email address of the assessor or disability advisor

**Signature of assessor or disability advisor  
(or type name if submitting electronically)**

**Date**

### **Checklist. Ensure you and your disability advisor have provided the following:**

Application for your main funding, such as tuition fees, loan, bursary, and living-costs grants.

Evidence of your disability if you are applying for DSA for the first time.

A copy of your needs assessment, if you are applying for DSA for the first time.

Completed all the sections on the form and signed the declaration on this page.

A copy of quotes for equipment or 2 quotes for taxis. This only applies to students applying for large equipment or travel expenses.

**Please supply all the required information. Anything missing will delay your application.**

**Check all the information is correct and save the form to your device.**

**Upload your completed form to your [SAAS Account](#) using the Document Uploader.**

## **Additional information**

Please use the space below to provide extra details about anything relating to this application.

## Data Protection

We take our responsibilities for the way we store, secure and use your personal information seriously, and always seek to respect your privacy and to meet our legal obligations. These obligations include the General Data Protection Regulation, the Data Protection Act 2018, and other regulations and legislation relating to privacy and communications.

The information provided on this form will only be shared when it is necessary to do so to enable us to effectively provide and administer financial support under the Disabled Students' Allowance.

For details on how we use your information and who we may share your information with, visit our privacy policy at [Student Privacy Statement \(saas.gov.uk\)](https://www.saas.gov.uk/student-privacy-statement).

Our Privacy Policy explains:

- the purposes for which we use personal data and the legal basis for that use
- the categories of data we collect and how we acquire it, especially in those cases where it may come from another party
- our approach to sharing data and gives information about the organisations with whom we share data and why we do so
- your various rights and how to exercise them

If you require further information about how your information is processed, contact the SAAS Data Protection team at [SAAS Data Protection Mailbox@gov.scot](mailto:SAAS_Data_Protection_Mailbox@gov.scot).

## Fraud Statement - Prevention, Detection, Investigation and Reporting of Crime

SAAS is under a duty to protect the public funds it administers, and to this end will use the information you have provided on this form for the prevention and detection of fraud. We will also share this information with other bodies responsible for auditing or administering public funds for these purposes. SAAS participates in the National Fraud Initiative (NFI) data matching exercise. For further information, visit <https://www.saas.gov.uk/about-saas/fraud-prevention>.

## Fraud Prevention Agency Fair Processing Notice

The personal information we have collected from you will be shared with fraud prevention agencies who will use it to prevent fraud and money-laundering and to verify your identity. If fraud is detected, you could be refused further funding from SAAS and certain services, finance or employment from other organisations.

You can also obtain a copy of the full fair processing notice by emailing [SAASCFT@gov.scot](mailto:SAASCFT@gov.scot). This will include further details on your data protection rights and how your information will be used by us and these fraud prevention agencies.

If you require a paper copy of the full privacy or fraud statements, contact us on **0300 555 0505**.