

DSASL



Disabled
Students'
Allowances
2012/13
Application Form

This form should only be used if you are also applying for student support on form PN1 or PR1. If you are not applying for student support, and wish to only apply for disabled student's allowances, you should complete form DSA1F.



DSASL

SFE/DSASL/1213

This form is also available on our website
www.direct.gov.uk/studentfinance

What do I need to do to get Disabled Students' Allowances (DSAs)?

Here is a summary of the steps involved in applying for and receiving DSAs.



1

Fill in the application form

Complete and return this DSA application form with all of the requested evidence.



2

Find out if you qualify

Once we have received your application and all of your evidence we will assess your application and send you a letter to let you know if you qualify for DSAs or not.



3

Attend a needs assessment

If you are eligible for DSAs you will need to arrange a needs assessment to identify any specialist equipment and other support that you may need for your course.



4

Receive your needs report

After you attend your needs assessment you will be sent a needs report, which identifies the equipment and other support you will need, how much it will cost, and where to get it from.



5

Find out what the DSAs can pay for

We will send you a letter to tell you whether any equipment and other support that has been recommended in your needs assessment can be paid for from DSAs. We will also give your instructions for ordering equipment or arranging other support.



6

Receive your support

Your funding will be paid direct to the supplier of the equipment or service.



Where can I find more information about Disabled Students' Allowances?

Visit **www.direct.gov.uk/studentfinance**

You can also find more information in the guide:


- Bridging the gap: A guide to the Disabled Students' Allowances (DSAs) in higher education 2012/13.

If you require this form or the above guide in Braille, large print or audio, please contact us.

How can I contact you?

- Visit **www.direct.gov.uk/studentfinance**
- Contact us on **0845 300 50 90** or by textphone on **0845 604 4434**.

Instructions

- Whenever you see this icon you must provide evidence to support your application. 

section 1 personal details

Personal details

a Customer Reference Number

Forename(s)

Surname


Sex

Date of birth

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>									
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<input type="checkbox"/>	Male				<input type="checkbox"/>	Female			
<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Contact details

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


Home address	Term-time address 
<input type="text"/>	<input type="text"/>
Postcode <input type="text"/>	Postcode <input type="text"/>
Home phone number <input type="text"/>	Date on which you will move to this address <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Mobile phone number <input type="text"/>	
Email address <input type="text"/>	

section 2 other financial support

In academic year 2012/13 will you be eligible to apply for:

- a Department of Health or NHS bursary (excluding the social work bursary paid by the NHS Business Services Authority); or
- a Scottish Government Health Directorate Bursary (Scottish Healthcare Allowance); or
- a healthcare bursary from the Department of Health for Northern Ireland?

Yes No

 If 'Yes', you will **not** qualify for DSAs from Student Finance England. **Please 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 because of a disability, mental health condition or specific learning difficulty.

section 3 your disability, mental health condition or specific learning difficulty

a Please give full details and provide evidence of your disability, mental health condition or specific learning difficulty.

e Physical disability/mental health condition

You should provide a written medical statement from a doctor or appropriately qualified specialist, confirming the nature of your disability or mental health condition.

e Specific learning difficulty (for example, dyslexia)

You should provide a full diagnostic assessment carried out after your 16th birthday by a chartered or practitioner psychologist or specialist teacher holding a current Assessment Practising Certificate. If you had a diagnostic assessment carried out before your 16th birthday it will usually require an update so we can fully assess how your study will be affected by your specific learning difficulty.

It is your responsibility to pay any costs to obtain the required evidence.

b On what date was your disability, mental health condition or specific learning difficulty last assessed?

/

/

section 3 your disability, mental health condition or specific learning difficulty

c Is this your first application for Disabled Students' Allowances (DSAs)?

Yes

No

If 'Yes' go to **Section 4**

If 'No', please provide details of each previous DSA funding application you have made.

Date of application	Funding authority applied to e
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e You must provide evidence showing the result of each previous DSA funding application and any DSA Needs Assessment Report you received from the funding authority.

If you cannot provide the evidence requested, please provide full details of the funding you received in the box below.

We may contact the relevant funding authorities for further information.

Declaration

Our Data Protection Statement sets out who will use the information provided on this form and what they will use it for. Before signing this form please read our statement online at www.direct.gov.uk/studentfinance-dataprotection. Alternatively, you can request a copy by writing to the Student Loans Company (SLC) at 100 Bothwell Street, Glasgow, G2 7JD or by calling us.

- 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 I might be refused financial support, or prosecuted and my financial support withdrawn.

Your full name (in BLOCK CAPITALS)

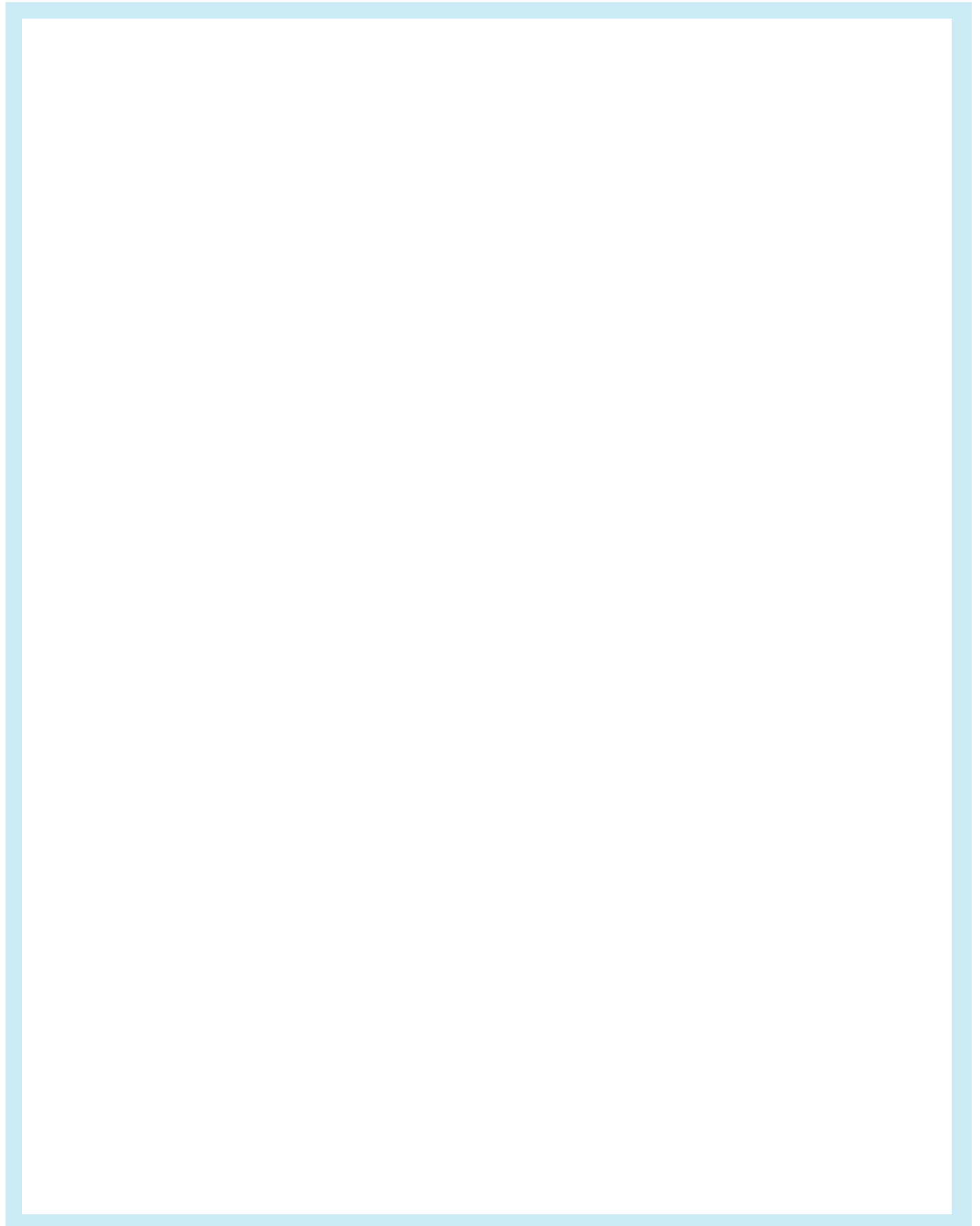
Your signature

Date

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Additional notes

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



Checklist

Before returning this form, please make sure you have done the following:

- Signed and dated the declaration.
- Enclosed all the evidence requested to support your application. Any original evidence you send will be returned to you as soon as possible. 



Please remember to pay the correct postage fee.

Once you have completed this form, and signed and dated the declaration, please return it to us at:

**Student Finance England
PO Box 210
Darlington
DL1 9HJ**