

DSA1

2018/19

Application for  
Disabled  
Students'  
Allowances

This form is also available from [www.gov.uk/studentfinance](http://www.gov.uk/studentfinance)



Find us on [facebook.com/SFEngland](https://www.facebook.com/SFEngland)



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## Who should complete this form

**What type of course are you/will you be studying?**


- Full-time undergraduate course  
Have you applied for other student finance (Maintenance Loan or Tuition Fee Loan)?
  - Yes – **You should complete a DSA Slim form**
  - No – **You should complete this form**
- Part-time undergraduate course – **Complete this form**
- Postgraduate course – **Complete this form**
- Postgraduate healthcare course  
Are you professionally registered in the subject you are/will be studying?
  - Yes – **You should not complete this form**
  - No – **You should Complete this form**

You can download a DSA Slim form from [www.gov.uk/studentfinance](http://www.gov.uk/studentfinance).


**If you're a full time undergraduate student and you want to apply for other student finance as well as DSAs**, you should complete a student finance application form and a DSA Slim application form, both are available to download from [www.gov.uk/studentfinance](http://www.gov.uk/studentfinance)

### **Application deadline**

You should return your application as soon as possible and no later than 9 months after the start of your academic year. See page 7 of the DSA1 notes for academic year dates. If you are unable to return your application by this date use the 'Additional notes' pages at the end of this form to tell us why.




# How to get Disabled Students' Allowances (DSAs) in 3 easy steps



## 1 Apply for DSAs

Complete all sections in this form, and return it with all the evidence we need. The sooner we receive your completed form with all evidence the quicker we'll be able to tell you if you could get DSAs.

Make sure you sign and date the declaration at the end of this form.



## 2 Find out exactly what equipment and support you need

If you are eligible for DSAs you may need to attend a Study Needs Assessment to make sure you get the right specialist equipment and/or services to help you complete your course. If you need to attend a Study Needs Assessment we'll send you a letter to tell you how to do this.

If you do need to attend a Study Needs Assessment the Assessment Centre will send us a report. This will recommend equipment and other support you may need, how much it will cost and who can provide it. You will also receive a copy of this report. We will review their recommendations and make our final decision.

This process can take some time – make sure you book your Study Needs Assessment as soon as you get our letter so that you can get all the necessary equipment and support before your course starts.



## 3 Get your equipment and support

We'll send you a DSA entitlement letter to tell you what equipment and other support you will receive DSAs for. The letter will also provide instructions on how to arrange delivery of your equipment and/or arrange other support. Don't buy or arrange equipment or support before you receive your DSA entitlement letter because we won't be able to reimburse you for these costs.

**n** Where you see this icon you should check the guidance notes for help to complete a question.

**e** Where you see this icon you need to send evidence with your application. Use the guidance notes to find out what you need to send.

**You can order forms and guides in Braille, large print or audio. For more information on how to do this please refer to the notes.**



# Section 1 Personal details

**!** If you will be studying a postgraduate healthcare course in a discipline you're already professionally registered in, you should not complete this form.

If you have applied for student finance before, please provide your Customer Reference Number

## Personal details

**a** Title

 Mr  Mrs  Miss  Ms

Forename(s)

Surname

Sex

 Male  Female

Date of birth

 /  / 

Please complete these questions with the details exactly as stated on your birth certificate or passport.

Place of birth (the name of the town or village)

Nationality **n**

## Identity evidence details

**b1** Do you hold a UK passport?

 Yes  No If 'No' go to b3

**b2** Provide the following details from your **UK passport**, which must be **currently valid and not expired** (this is the easiest way for you to verify your identity and means you **do not need to send us your passport**).

**If your passport is not valid or has expired go to b3**

Passport number

Forename(s)

Surname

Date of issue

 /  / 

Date of expiry **n**

 /  / 

**b3** Send your original **non-UK passport** or **Biometric Residence Permit**; **e**

or

Send your original **UK birth or adoption certificate** and a completed Birth/Adoption Certificate form. **e**



# Section 1 Personal details

## Previous loans

**c** Have you ever had any other loans from the Student Loans Company (SLC)?

Yes  No

If 'No' go to d

If 'Yes', are you behind with the repayments? **n**

Yes  No

## Armed Forces

**d1** Are you a member of the Armed Forces serving outside England? **n e**

Yes  No

**d2** Are you a family member of someone in the Armed Forces serving outside England? **n e**  
(for example: spouse or child)

Yes  No

## Contact details

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

### Home address

Postcode

Home phone number

Mobile phone number

Email address **n**

### Term-time address

Postcode

Date you will move to this address

The DSA team may contact you by email, so please put your main email address.



## Section 2 Other financial support

### Bursaries and awards

If you are an **undergraduate student** in this academic year will you be eligible to apply for

**a1** A Department of Health or NHS Bursary (excluding the Social Work Bursary paid by the NHS Business Services Authority)  Yes  No

**a2** A bursary from Student Awards Agency Scotland (SAAS)  Yes  No

**a3** A Healthcare Bursary from the Department of Health (DoH) for Northern Ireland  Yes  No

**!** If you've answered yes to any of the above questions, do not continue with this application unless you are starting a part-time course on or after 1st August 2017 at a university or college in England. If you're not continuing with this application, you should contact your bursary provider for advice on any extra support you may be entitled to.

If you are a **postgraduate student** in this academic year will you be eligible to apply for

**b1** A Department of Health, NHS, SAAS or other healthcare bursary  Yes  No

**b2** A Research Council bursary  Yes  No

**b3** An NHS Business Services Authority bursary for students studying an approved postgraduate social work course that includes extra support because of your disability  Yes  No

**b4** A bursary from your college or university that includes extra support because of your disability, mental health condition or specific learning difficulty (do not count any payment you get from your university or college's hardship fund).  Yes  No

**!** If you have answered 'Yes' to any of the above questions in this section 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.



# Section 3 Residence

## Nationality

**a1** Are you a UK national? **n e**

Yes  No If 'Yes' go to b1

**a2** Are you an EU national? **e**

Yes  No If 'No' go to a4

If 'Yes', have you lived in the UK and Islands for five years before the first day of the first academic year of your course?

Yes - go to b4  No - go to a3

**a3** Are you a Postgraduate student?

Yes  No If 'No' go to a4

If 'Yes', have you lived in the UK and Islands for three years before the first day of the first academic year of your course?

Yes - go to b2  No - go to a4

**a4** Are you the child of a Swiss national?

Yes  No If 'No' go to a6

**a5** Will your Swiss national parent be living in the UK on the first day of the academic year? **n e**

Yes  No If 'Yes' go to b2

## Residence status

**a6** Are you or your:

- husband, wife, civil partner; or
- parent(s), step-parent; or
- child, son or daughter-in-law, child's civil partner

a European Economic Area (EEA) national or Swiss national who is working, has worked or is looking for work in the UK? **n e**

Yes  No

If 'No' go to a7

If 'Yes', please give details below.

You should also give details of your previous studies.

If you are currently working, are you going to continue working during your studies?

Yes  No

If 'Yes', please give details. **e**

go to b2



## Section 3 Residence

**a7** Do you have 'settled status' in the UK? **ne**

<input type="checkbox"/> Yes	<input type="checkbox"/> No	If 'No' go to a8
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If 'Yes', give the date you received this status.

<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	go to b2
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**a8** Have you or your:

- husband, wife, civil partner; or
- parent(s), step-parent

been granted 'refugee status' by the UK Government? **ne**

<input type="checkbox"/> Yes	<input type="checkbox"/> No	If 'No' go to a9
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If 'Yes', and if applicable, please give the following:

Home Office reference number

<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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Date this status is due to expire

<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	go to b2
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**a9** Have you or your:

- husband, wife, civil partner; or
- parent(s), step-parent

been granted Humanitarian Protection. **ne**

<input type="checkbox"/> Yes	<input type="checkbox"/> No	If 'No' go to a10
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If 'Yes', and if applicable, please give the following:

Home Office reference number

<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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Date this status is due to expire

<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	go to b2
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**a10** Have you or your:

- husband, wife, civil partner; or
- parent(s), step-parent

been granted 'leave to remain' as a Stateless Person? **ne**

<input type="checkbox"/> Yes	<input type="checkbox"/> No	If 'No' go to b2
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If 'Yes', and if applicable, please give the following:

Home Office reference number

<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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Date this status is due to expire

<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	go to b2
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## Section 3 Residence

**a11** On the first day of the first academic year of your course will you be under 18 and will you have been living in the UK and islands for seven years? **n**

Yes  No

**a12** On the first day of the first academic year of your course will you be over 18 and will you have lived in the UK for at least 20 years, or at least half of your life? **n**

Yes  No

**b1** In the three years prior to the start of the first academic year of your course, **did you live outside the UK and Islands** at any time?

Yes  No

If 'No' go to b3

**b2** Give details of your residence for the three years before the first academic year of your course. **n**

Full address

From   /   /

To   /   /

Why were you there?

Full address

From   /   /

To   /   /

Why were you there?

If you require further space to provide your answer, please give the details requested above on the Additional notes section at the back of this form.



# Section 3 Residence

**b3** At any time since 1 September 2015 has:

- either of your parents, step-parents, guardians; or
- your husband, wife, civil partner

lived or worked outside the UK and Islands or, in the case of an EU, EEA or Swiss national, outside the EEA or Switzerland?

If 'Yes', please give details.

**b4** Give details of your residence for the five years before the first academic year of your course. **n**

Yes  No If 'No' go to section 4

Full address

From   /   /

To   /   /

Why were they there?

**go to section 4**

Full address

From   /   /

To   /   /

Why were you there?

Full address

From   /   /

To   /   /

Why were you there?

If you require further space to provide your answer, please give the details requested above on the Additional notes section at the back of this form.

## Section 4 About your course and university or college

In this section, please give details of your first choice university or college and course.

### University or college details

- a University or college name and address

Postcode	

### Course details

- b Course name **n**  
If you are following a combined studies or modular course, list all subjects being studied.

Qualification you expect to gain (for example BSc Physics)

Course start date

Course end date

Course length (years) **n**

Year of course

If the course is franchised to another university or college, give the address of the other university or college.

<input type="text"/>	
<input type="text"/> / <input type="text"/>	
<input type="text"/> / <input type="text"/>	
<input type="text"/>	
<input type="checkbox"/> Foundation year	<input type="checkbox"/> Third year
<input type="checkbox"/> First year	<input type="checkbox"/> Fourth year
<input type="checkbox"/> Second year	
Other (give details)	
Postcode	

**!** Remember to read, sign and date the declaration on page 18

## Section 4 About your course and university or college

### Term details

**c** Where will you spend most of your time this academic year? **n**

Term 1

University or college

Study abroad

Work placement

Term 2

University or college

Study abroad

Work placement

Term 3

University or college

Study abroad

Work placement

If you have ticked 'University or college' for all 3 terms  
**go to section 5**

**d** Have you been accepted onto the Erasmus exchange scheme?

Yes  No

If 'Yes' or you'll be studying abroad go to section 5

## Section 4 About your course and university or college

### Placement details

**e** Where will your placement be?

Placement name and address if known **n**

Is the placement paid or unpaid?

**e** If 'unpaid' please tick which type

Abroad  UK  Don't know

Postcode

Paid  Unpaid

a hospital, Public Health Service Laboratory or with a Clinical Commissioning group in the UK;

a Special Health Authority, the National Health Service Commissioning Board, the National Institute for Health and Care Excellence, the Health and Social Care Information Centre, Local Health Board, Health Board, Special Health Board or Health and Social Services Board in the UK;

a Local Authority carrying out its duties relating to health, welfare or caring for children and young people, a voluntary organisation providing facilities or carrying out similar activities or a Local Authority acting in the exercise of public health functions in the UK;

the prison or probation sector or after-care services in the UK;

unpaid research in a UK or overseas institution;

an unpaid placement in the Houses of Parliament;

an unpaid placement that is not listed above.



## Section 5 Your university or college

**Please ask your university or college to complete this section.**

If you do not want to tell your university or college about your disability, mental health condition or specific learning difficulty, please read section 5 of the notes for further instructions and then go to section 6. **ne**

**To be completed by the student's university or college.**

### Instructions for university or college

Complete this section for all students, **unless** they are on a full-time undergraduate course **and** are applying for other finance.

Complete the SLC or UCAS university or college code.

Tick the box that applies to the student.

Complete the university or college declaration.

SLC or UCAS university or college code

### Part-time undergraduate students

tick if applicable

I confirm to the best of my knowledge and belief that:

- the student named in section 1 is studying or applying for the course named in section 4;
- the student started their course **before 1 September 2012** and plans to complete the course at an average rate of study of at least **50%** of that needed to complete the course, or
- the student started their course **on or after 1 September 2012** and plans to complete the course at an average rate of study of at least **25%** of that needed to complete the course, or an equivalent course, on a full-time basis; and
- the student's rate of study is  % of the equivalent full-time course.

### Full-time undergraduate students, (who are not applying for other finance) and full-time undergraduate distance learning students.

tick if applicable

I confirm to the best of my knowledge and belief that:

- the student named in section 1 is studying or applying for the course named in section 4; and
- the student named in section 1 plans to complete the course on a full-time basis either attending their course or by distance learning methods.





## Section 6 Your disability

### DSAs information and evidence

- a** Please give the name or diagnosis and provide **photocopied** evidence of your disability. See the notes for what evidence you need to send. You can also download and complete the Disability Evidence form from [www.gov.uk/studentfinance](http://www.gov.uk/studentfinance)

Your evidence must confirm that you meet the definition of a person who has a disability under the Equality Act 2010. ■ ■

If you require further space to provide your answer, please give the details requested above on the Additional notes section at the back of this form.



## Section 6 Your disability

### c Consent to share DSA

**!** Please mark the boxes below to give consent to the following DSAs arrangements. This will allow us to make sure you get the help you need by exchanging information with the necessary organisations. If you do not give consent it may delay any support you need.

**You have the right to withdraw your consent to us processing your personal information in relation to this application form. To withdraw your consent, please contact us.**

- I agree that Student Finance England and the disability service at my university or college may exchange information about my application for DSAs where this is necessary to make sure I get the help I need.
- I agree that Student Finance England and my DSAs Needs Assessor may exchange information about my application for DSAs where this is necessary to make sure I get the help I need.
- I agree that Student Finance England and my DSAs suppliers may exchange information about my application for DSAs where this is necessary to make sure I get the help I need.

## Section 7 Your UK bank or building society account details

### UK bank or building society account details

**The account must be in your own name and be able to accept direct credits.**

Sort code

 -  - 

Account number

Building society roll number  
(if applicable)

# Student Declaration

Before signing and returning your completed form, you should read the Privacy Notice in the accompanying notes. 

This declaration covers all of the student finance available to students for academic year 2018/19.

You should read the specific terms and conditions about loans, Childcare Grant and Disabled Students' Allowances because they will affect you if you apply for them at any time in this academic year. If you don't apply for these in the academic year their specific terms and conditions will not affect you.

**Your application for financial support may be delayed unless you sign and date this declaration.**

## General Declaration

- 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 may not receive financial support, any support I have received may be withdrawn and I could be prosecuted.
- I agree to give SLC any information they require to process my application and agree to tell them immediately if my circumstances change in any way that might affect my entitlement to financial support. I understand that if I do not do this, I may not receive any further payments, and may have to repay the financial support I have already received.
- I agree that in the event of receiving an overpayment of financial support, I am obliged to repay this in full.
- I understand that if I have provided details of my UK passport on this form, SLC will verify those details with Her Majesty's Passport Office.
- I confirm where I have provided any personal information in relation to a third party, I have informed them of this.



## Loan Contract

- a I confirm I have read and understood the guide to terms and conditions available online at **[www.gov.uk/studentfinance](http://www.gov.uk/studentfinance)**
- b I acknowledge and agree that any loan(s) made to me by the Secretary of State for Education, 'the lender' (which includes any persons exercising functions on behalf of the Secretary of State pursuant to section 23(4) of the Teaching and Higher Education Act 1998 as amended from time to time or successor legislation, 'the Act') will be on the terms set out in these declarations and in Regulations which are made under section 22 of the Act as amended from time to time.
- c I undertake to repay the lender any loan(s) made to me, together with all and any interest, penalties and charges which apply.
- d I acknowledge and agree that in the event that I have: (i) reached the age of 18 years; and (ii) have entered into one or more agreements for a loan under section 22 of the Teaching and Higher Education Act 1998 (and relative secondary legislation) before I reached the age of 18 years, upon signing this declaration I am agreeing to ratify any and all such student loans. I understand that ratification of any agreement for a loan made with me before I reached the age of 18 years is a statutory precondition of my eligibility for student support after attaining the age of 18 years.
- e I agree that any loan(s) made to me as a consequence of the acceptance of my application by the lender is a/are contract(s) between me and the lender which binds me from the payment to me of the first loan advance and that the repayment of any such loan(s), together with all and any interest, penalties and charges which apply, will be due by me to the lender as a debt.
- f I agree that I shall be obliged to make repayment of my loan(s), together with all and any interest, penalties and charges which apply, to such address as shall be notified to me in writing and that any services in respect of my loan(s) may be provided at such address or other address(es) as the lender may from time to time determine and that the service of providing the loan is provided at the lender's principal address.
- g I agree that any action for repayment and/or in respect of or in connection with my loan(s) and/or all and any interest, penalties and charges which apply, will be brought before the ordinary civil courts and shall be governed by the general rules of civil procedure.
- h I agree that my request for a loan, the loan and the contract between me and the lender shall be governed by the law of the place of my home address as stated in this application form (or, if my address is outside the United Kingdom, English law).

- i I irrevocably agree that the courts of the part of the United Kingdom in which my home address stated in this application form is situated (or the English, Scottish and Northern Ireland courts where my address is outside the United Kingdom) shall have non-exclusive jurisdiction to hear any action or proceedings arising out of or in connection with the loan and the contract between me and the lender and I irrevocably submit to the jurisdiction of those courts and waive any objection to the jurisdiction of those courts, provided that this shall not limit the lender's rights to take proceedings against me in any other court of competent jurisdiction.
- j I agree that from the date I submit this form until the date when my loan(s), together with all and any interest, penalties and charges which apply, is fully repaid I will notify the lender of any changes in the personal details (including National Insurance Number) and contact details I have provided as required in accordance with the regulations referred to in paragraph b.
- k In the event that I leave the United Kingdom to reside outside the United Kingdom or that for any other reason I am outside the UK tax system, I undertake to inform the lender in accordance with the regulations referred to in paragraph b and I undertake to provide the lender with my new and any subsequent contact details until my loan, together with all and any interest, penalties and charges which apply, is fully repaid.
- l I agree to take all future action requested by the lender and provide the lender with all information required to ensure repayment, in accordance with the regulations referred to in paragraph b.
- m If I breach any of the terms under which any loan(s) will be made I agree that I will be obliged to pay any charges and penalties which may apply under the Teaching and Higher Education Act 1998 and the regulations made under that Act, as amended from time to time or successor legislation and/or regulations.
- n I understand that the Student Loans Company (SLC) will check my National Insurance number and personal details with the Department for Work and Pensions (DWP). If I do not know my National Insurance Number, or if the number I provide cannot be authenticated, DWP will trace and give my number to the lender.
- o If I have broken the terms of this contract I agree that the lender may share information held about me and my account with any person, including the government or a government agency of another country, who may assist in establishing my whereabouts and/or in taking action to recover outstanding loan amounts.

## Disabled Students' Allowances (DSAs)

- I understand that any equipment I receive through DSAs must be used for my course of study and SLC is not responsible for paying any repair costs.
- I understand Student Finance England will pay the suppliers of any equipment and support directly.

## Childcare Grant

- I understand that if I do not take up my childcare, or if I change to a childcare provider who is not registered or approved, I will have to pay back any overpayment.
- I understand that if I do not provide the evidence of childcare costs within the timescales set, I might lose my entitlement. Also if my payments to my childcare provider are different from the estimates I provide, I understand that further payment will increase or decrease accordingly, or if no further Childcare Grant payments are due to be paid to me, I may be liable to repay any difference.

Customer Reference Number	<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"/>					
Your full name (in BLOCK CAPITALS)	<input type="text"/>														
Your signature (in ink)	<input type="text"/>					Today's date									
	<input type="text"/>					Day	Month	Year							
<b>X</b>	<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"/>

## Your decision about Bursary and Scholarship data sharing consent will not affect your entitlement to any other financial support available.

You may be eligible for a bursary or scholarship. In order for your university or college to determine and pay any bursary or scholarship to which you may be entitled, we will share some of your personal, financial and course details as well as information about your eligibility for student finance with them. **n**

If you **do not** wish your details to be shared for this purpose, please tick this box.

# Checklist

Before you return this form please make sure that:



you've answered all the questions that apply to you

Tick



your university or college has completed section 5  
(if this applies to you)

Tick



you've **read, signed and dated** the declaration

Tick



**you've included all the evidence, including medical evidence, we need with this form.**

Tick



If you don't send all the evidence we need, your application may be delayed.



**Remember, you don't need to send your UK passport** as proof of your identity. You only need to **complete your UK passport details in section 1**. If you send your passport it may take several weeks before we can return it to you.



**Remember to pay the correct postage.**

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

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

**You can also return your completed form and evidence to the DSA team by email at [dsa\\_team@slc.co.uk](mailto:dsa_team@slc.co.uk)**



## Additional notes

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



## Additional notes

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