THE UNIVERSITY CHILDCARE HARDSHIP FUND – APPLICATION FORM 2017/18 **1. PERSONAL DETAILS** University Student Number: (USN) ______ Surname: _____ Title: _____ First Name(s): ______ Nationality: _____ Email: _____ _____ Current course (BA, PhD, etc): _____ Subject: _____ College: Start date (dd/mm/yy): ____/ ___ Expected end date: ___/ Year of Study: _____ I am: (tick all that apply) Undergraduate Graduate Studying full-time Studying part-time For PhD graduates only - Number of weeks to submission: ____ No Is your partner with you in Cambridge? Yes I am single Partner/spouse's full name: ______ Nationality _____ Partner/spouse is: working full-time a student unemployed working part-time (no. of hrs per week) 2. DETAILS OF YOUR HOUSEHOLD INCOME PER YEAR 2.1 Income for Maintenance Applicant per Applicant's Source of income partner per year year Grants/Scholarships/Sponsorship* £ £ £ Family/Friends £ **Net Earnings**, after deductions for tax and NI (include earnings from £ £ supervising, demonstrating or other part-time employment) £ TOTAL £ *If you have a grant, give the name of the grant-awarding body, sponsor, or institution guaranteeing income: 2.2 Total Savings or Capital Please detail any savings or capital, indicating how much you expect to spend in this academic year:

2.3 Loans

Total amount of any loans: Applicant £ _____ per year Applicant's Partner £ _____ per year

Please include any further loan details:

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Date Received	Date Processed	Signed

Child Benefit	£	per week/per m	nonth (delete as appropr	iate)		
Income Support	£	per week/per month				
Housing Benefit	£	per week/per month				
Child and Working Tax Credits	£	per week/per month				
Other benefit	£	per week/per month				
TOTAL	£	per week/per r	month			
5 Describe any additional income	e, including f	rom capital investme	ents, trusts or subletting	g:		
6 If you are a self-financed stude 7 If you pay fees from this incom	e, how much	n do you pay?	University fees: £ College fees: £	per year per year		
(PLEASE NO	OTE: It is very	/ important fees are co	ompleted accurately for as	ssessment purp		
8 If your partner is a student, whi	ich					
Institution and College does s/	he attend? _					
-						
as s/he applied for childcare funds f	irom his/her ir	nstitution? Yes / No	0			
Institution and College does s/ as s/he applied for childcare funds f 'Yes', what award is received/expec	irom his/her ir	nstitution? Yes / No	0			
as s/he applied for childcare funds f	from his/her ir	nstitution? Yes / No ear? £ I	o f 'No', explain circumstar			
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1 st Child	Name:	Date of birth (dd/m	m/yy)://	Age: _		
••	childcare , childminder)	Name of childcare provider (include OFSTED No.)	Childcare start & expected end date	hours/ week	weeks/ year	Annual cost
						£
						£
			Total 1 st Child:	£		·
2 nd Child	Name:	Date of birth (dd/m				
Type of childcare (e.g nursery, childminder)	Name of childcare provider (include OFSTED No.)	Childcare start & expected end date	hours/ week	weeks/ year	Annual cost	
						£
						£
			Total 2 nd Child:	£		·
3 rd Child	Name:	Date of birth (dd/m				
			-	1		
Type of childcare (e.g nursery, childminder)	Name of childcare provider (include OFSTED No.)	Childcare start & expected end date	hours/ week	weeks/ year	Annual cost	
					£	
						£
			rd -	£		
			Total 3 ¹ Child:			
		CHILDCARE COSTS O	Total 3 rd Child:	~		
						_
		EXPENDITURE PER MONTH	GRAND TOTAL: £ _			-
Please prov	ide details of ar	EXPENDITURE PER MONTH	GRAND TOTAL: £ _	u and you		-
Please provi	ide details of ar rtgage paymer	EXPENDITURE PER MONTH ny other major monthly outgoings/ nts	GRAND TOTAL: £ _	u and you £		-
Please provi Rent/moi Househo	ide details of ar rtgage paymer Id bills (e.g. co	EXPENDITURE PER MONTH ny other major monthly outgoings/ nts puncil tax, electricity, gas, telephon	GRAND TOTAL: £ _	u and you £ £		-
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5. OTHER INFORMATION

Please provide any further information that you believe to be relevant to your application. Are there any special circumstances that you wish to be taken into account in support of your application? (These might include special demands of your course, special needs of your children or other family circumstances). If you are overrunning, include details of when you expect to submit. Attach an additional sheet if necessary.

6. DECLARATION

I have attached documentation that confirms I have secured Ofsted-registered childcare place/s. Your Tutor may ask to add supporting documents before signing the declaration.

I confirm that the information I have given is correct and reflects my financial circumstances.

Signed: _____ Date (dd/mm/yy): _____/___/

All applications must be supported by a Tutor's signature.

7. TUTOR'S SECTION

The Committee would greatly appreciate any comments you are able to make in support of this application. On the assumption that the student's resources were understood, at the time of acceptance, to be sufficient to meet fees and expenses (including those of dependants) for the duration of the proposed course, the Committee attaches considerable importance to the College's comments on the reason why this is no longer the case. Please also indicate the extent of any College financial support given or promised during this academic year and any explanations for an applicant who is overrunning.

I confirm that the information given is correct and complete to the best of my knowledge.

Tutor's name (Block capitals):

Signed: _____ Date (dd/mm/yy): ___/___/

Completed forms should be returned by the Tutor/College to: The Secretary, Joint Committee on Childcare for Students, Childcare Office, 21 Trumpington Street, Cambridge CB2 1QA.

September 2016