

## **Social Work Bursary: Academic Year 2017/18**

### **Application notes for students on undergraduate courses**

#### **Please note:**

- You must make an application for a Social Work Bursary regardless of whether or not you have been allocated a capped (bursary-funded) place.
- If you are deferring or repeating any part of your course, or you require an extension to complete it, in most cases you will **not** retain your capped place and will **not** be eligible to receive Social Work Bursary funding for the remainder of your course. In such cases we would advise you to discuss your situation with your course leader.

#### **Completing the application**

If you are going to be starting Year 1 of an undergraduate social work course from September 2017, **please do not complete this form.**

The Social Work Bursary is **not** available to any first year undergraduate students.

#### **Part 1 – Your details**

Please complete this section in BLOCK CAPITALS (including your email address) and tick all boxes appropriate to your status. This will help us hold the correct details for you and contact you if we need to.

The names you use here need to match the names you give to your university/college when you register.

Please provide details of all higher education qualifications you hold.

#### **Part 2 – About your course**

Please give us the exact name and level of the course you are studying. If you are unsure of the name, level or type of course you are studying, please ask your university/college. If you will be in the first year of your course in the 2017/18 academic year, you will not be eligible for a Social Work Bursary for that year.

You will not be eligible for the bursary if you are on an employment based course. These are generally when your studies are being supported by your employer, including direct Open University courses.

If you are repeating any modules of your course please tell us as we may need to contact you and/or your university/college regarding this..

### Part 3 – Payment method

If this is the first time you have applied to us for a Social Work Bursary or you have applied before but now wish to change your bank details, please provide the details in this section.

### Part 4 – Residency details

You must satisfy the residency criteria to be eligible for a Social Work Bursary. The full residency criteria can be found on our website at: [www.nhsbsa.nhs.uk/swb](http://www.nhsbsa.nhs.uk/swb)

If you are a **non-UK/non-EU/non-EEA national** you must send us your passport, residence permit or travel document.

If you are an **EU/EEA national** (but not a UK national) you must send us either your passport or your National Identity Card.

If you are a **UK national**, you must enclose your passport or your most recent Student Finance England award notification.

Please remember that all of the evidence you provide must be **original documentation** as we cannot accept photocopies under any circumstances

#### Applying for a Social Work Bursary for the first time

**If you are living in the UK as the spouse, civil partner, child, or step-child of someone with either refugee status or humanitarian protection**, please provide details of their immigration status at section 4.3 and provide their passport or travel document and any relevant Home Office letter/s.

**If you are an EU/EEA or Swiss national**, please indicate this at section 4.3 and enclose your passport or National Identity Card.

If you have been ordinarily resident in the UK for at least three years before the start of your course, please provide evidence of this, such as:

- tenancy agreement/s
- council tax bill/s
- mortgage statement/s
- utility bill/s
- government letter/s
- benefit letter/s
- evidence of employment or self-employment

**If you have not been ordinarily resident in the UK for three years, but are currently working here**, please provide one of the following:

- your most recent pay slip
- evidence of current self employment
- evidence that you are currently claiming Job Seekers Allowance or other employment-related benefits

**If you are not a UK or EU/EEA national but you are living in the UK as the spouse, civil partner, child, or step-child of a person who is a UK national**, you must enclose with your application your passport and the other person's UK passport and evidence of your relationship to them, such as a marriage or civil partnership certificate, or your birth certificate, if you have one.

If you are not yourself a UK or EU/EEA national but you are living in the UK as the spouse, civil partner, child or step-child of a person who is an EU/EEA/Swiss national (but not a UK one) and that person is currently working in the UK, please provide one of the following:

- their most recent payslip
- evidence of current self-employment
- evidence they are claiming Job Seekers Allowance or other employment-related benefits

### **Part 5 – Other grants, bursaries, retainers or support**

Please tell us about any other funding you have applied for or will be receiving while studying. Do not include applications from Student Finance England.

### **Part 6 – Your employment details**

If you are currently working in the social care sector, please tick 'Yes' and ask your employer to complete section 6.2.

If you begin working in the social care sector after the start of your academic year, you must download and complete this part of the application form again ensuring it is signed by your employer and send it to us without delay.

Please ensure you post the original form to us as we cannot accept photocopies, faxed or scanned copies of the form.

### **Part 7 - Additional information**

Please use this space to give us any additional information you feel is relevant to your application. If you are repeating or have changed your course, please provide as much information as you can about this.

### **Part 8 – Data Protection**

We will treat all information you provide in line with the Data Protection Act 1998.

You can nominate one person to speak to us on your behalf; we call this 'third party authorisation'. If you would like to nominate someone please provide their first and last name, full date of birth and tell us the relationship between this person and yourself.

We use this information as security questions so please ensure these are completed correctly.

### **Part 9 – Applicant's declaration**

Please ensure you read and understand the declaration as it provides important information regarding what to do if you stop your studies for any reason.

Once you have read the declaration and you are happy with all the information you have supplied, please complete your name and then sign and date the declaration.

**We cannot accept photocopies of the declaration page.**

## **Part 10 – Posting your application to us**

Please list all original documents which you are sending with your application.

You should send any valuable documents to us through a secure postal method such as Special Delivery.

You should enclose a self-addressed, pre-paid Special Delivery envelope for the return of your documents. This will allow you to track the return of your documents once they leave us. If you do not send a pre-paid Special Delivery envelope, your documents will be returned to you by standard second class post.

If you are sending your application by Special Delivery, make a note of your Special Delivery reference number.

Please send your application to:

Social Work Bursaries  
PO Box 141  
Hesketh House  
200-220 Broadway  
Fleetwood  
FY7 9AS

## Social Work Bursary: Academic Year 2017/18

### Application notes for students on undergraduate courses

**Important note:** All eligible students will be entitled to a Placement Travel Allowance (PTA) of £862.50 (this amount will be paid pro-rata if you are a part-time student). In addition you may also be eligible for a bursary if you are nominated for funding by your university/college.

#### 1. Your details

##### 1.1 About you

Are you currently receiving or have you ever received a bursary (in full or part) from the NHS Business Services Authority (NHSBSA), General Social Care Council (GSCC) or the Central Council for Education and Training in Social Work (CCETSW)?

No  Yes  Give your bursary reference number

(Your bursary reference number begins with a '2' or '3'. Please leave blank if unknown.)

The names you use here need to match the names you give to your university/college when you register.

Title  Mr  Mrs  Ms  Miss  Other

Surname or family name

First name

Other names

Previous names

Date of birth

Address

Mobile phone number

Alternative phone number

Email

Marital status  Single  Separated  Widowed  Divorced  
 Cohabiting  Married  Civil partnership

Date of marriage/registration of civil partnership

## 1.2 Qualifications

Do you have any degrees, diplomas or other qualifications at higher education level?

No       Yes      *Give details below*

Do not include your A Level qualifications.

Name of qualification	Subject	Date awarded	University/college

## 2. About your course

### 2.1 Course details

Full name of social work course

If you are unsure, check with your university/college admissions department.

Is the course employment based or college based?

College based     Employment based **You are not eligible for a Social Work Bursary - do not complete this form.**

Placements are an essential component of your study and do not necessarily mean you are on an employment based course (which is generally when your studies are being supported by your employer, including direct Open University courses). If you are unsure about what type of course you are studying, please ask your university/college.

Is the course full-time or part-time?

Full-time     Part-time

How many years will your course last?

### 2.2 Details of where you will be or are studying

Name of your university/college

Town/city

### 2.3 Study details

Date you first started your course

Year of course you are studying in the academic year 2017/18  1st year **You are not eligible for a Social Work Bursary - do not complete this form**

2nd year  
Please send your SFE letter or passport (see application notes)

3rd year

Other Give details

If you require further space, please continue your answer at part 7.

### 2.4 Repeat study

Will you need to complete any social work modules from a previous year in the academic year 2017/18?

No Go to part 3

Don't know Inform us in writing of details when you know – go to part 3

Yes Go to part 3 - we may need to contact you or your university/college about this

If Yes please give reason ie medical, maternity

### 3. Payment method

#### 3.1 Your account details - If you have applied to us in a previous year for a Social Work Bursary and you do not wish to change your bank account details, please go to part 4.

If you are unsure about any of these details, check with your bank or building society. If you miss out any details, your payments may be delayed.

All payments are made by Banks Automated Clearing System (BACS). You must provide your account details by completing the BACS form below. We will not make payments to an account that is not in your name.

The account must be in the UK, be able to accept payments by direct credit and be **in the name of the bursary applicant**. If you are unsure of these details, please check with your bank or building society.

We are unable to pay the bursary into prepaid card accounts.

**Payment by BACS means you receive your money faster, provided that you supply the correct information. Please take the time to complete this section carefully and write clearly, otherwise it may delay or prevent payments.**

Name account held in  
This must be in your name

Account details  
Bank/building society name

Branch address

Bank/building society sort code

 -  - 

Account number

Roll or reference number

Building society accounts only

This is not your credit or debit card number and may include symbols and letters.



## 4. Residency details

Read part 4 in the instruction notes before completing this section.

### 4.1 The social work bursary in 2016/17

Did you receive a social work bursary in the academic year 2016/17?

No please complete the sections below

Yes Go to part 5 of this form

### 4.2 Personal Eligibility - to be completed by all students

To be eligible for a Social Work Bursary, all students, regardless of nationality, must meet certain residence rules. **Please answer the following questions in order for us to determine your eligibility.**

**This form will be returned to you if you do not complete each section.**

Are you a:

UK national - Remember to enclose your most recent SFE award notification or passport.

non-UK EU/EEA/Swiss national - Remember to enclose your most recent SFE award notification, your passport or your National Identity Card.

non-UK, non-EU/EEA/Swiss national - Remember to enclose your most recent SFE award notification or your passport/UK travel document.

### Country of residence

Please give below details of where you have lived for the whole of the 3 years preceding the first academic year of your course.

If you have lived in the UK, you must state which UK country this was i.e. England, Scotland, Wales or Northern Ireland.

Country	Reason	From	To

### UK further/higher education history

Please provide details of **all** of the further or higher education courses you have ever undertaken in the UK.

Name of college	Name of course	Full or part-time	From	To

### UK employment history

Name of employer	Employer's address	Full or part-time	From	To

Please answer the questions below if you have been absent from the United Kingdom, the Channel Islands or the Isle of Man because either you, your parent/s or a spouse, civil partner or partner has been employed abroad in the three years preceding your course. This includes members of the UK armed forces posted overseas.

**If this does NOT apply to you go to section 4.3.**

Name of the person in employment abroad

What is their relationship to you?

The nature of the work

The period(s) spent working abroad

Country	From	To

The nature of the contract.

Please provide as much information as possible including: the period of the contract(s), whether the contract includes liability for UK tax, whether the contract is renewable and whether the contract conveys an automatic right to return to the UK.

Have you maintained a home in the UK?  Yes  No

Reason	From	To

Further information:

### 4.3 Non-UK nationals

**If you are a UK national, please go to part 5.**

If you are **not** a UK national please complete this section and give details of your immigration status.

Please read the guidance notes at the front of the form under 'Part 4 - Residency details' before completing this section.

Date of your first arrival in the United Kingdom

Reason for coming to the United Kingdom

Name of parent, step-parent, spouse or civil partner

What is your relationship to this person?

Do you reside with your parents, step-parents, spouse or civil partner?

 Yes

 No

Immigration status	Student	Parent/ step parent	Spouse/ civil partner	Date of application	Date granted	Expiry date
EU National	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	N/A	N/A	N/A
EEA/Swiss National	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	N/A	N/A	N/A
Asylum seeker	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		N/A	N/A
Refugee	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Indefinite leave to remain	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			N/A
Humanitarian protection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Student Visa	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Limited leave	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Leave to remain	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			

## 5. Other grants, bursaries, retainers or support

Have you **applied for** or **are you receiving** any other grant, bursary, retainer or support as well as the Social Work Bursary? Do not include applications from Student Finance England.

No

Yes Give details. If you need more space, use part 7 of this application form.

Name of organisation you have applied to/are receiving funding from

Name of the grant, bursary, retainer or other support

If you are applying for or receiving a retainer, you must complete a bursary retainer declaration. Download a copy from our website at: [www.nhsbsa.nhs.uk/students/986.aspx](http://www.nhsbsa.nhs.uk/students/986.aspx) and send it with your application.

Dates of support

From  to

**If you apply for or receive ANY other grant, bursary, retainer or support after you submit your application, you must inform us in writing.**

**Career development loans do not affect your application for a bursary, but if we confirm your entitlement to a bursary, you are obliged to let your loan provider know.**

## 6. Your employment details

### 6.1 Will you be employed in the social care sector during your course?

If you are receiving a retainer only, you must complete a bursary retainer declaration. Download a copy from our website at: [www.nhsbsa.nhs.uk/Students/986.aspx](http://www.nhsbsa.nhs.uk/Students/986.aspx) and send it with your application.

No     Go to part 7

Yes     You must ask your line manager to complete the following declaration

### 6.2 Social care employer's declaration – to be completed by your employer

#### Note to employers

By completing this section you are confirming that the bursary applicant is your employee and is not receiving any of the following:

- sponsorship/support
- any paid time off to allow them to attend studies
- all or part of their tuition fees
- any practice learning opportunity with pay or any other financial support
- any other form of support in order to assist with their social work training

**The person who completes this declaration must be the applicant's line manager.**

If you have any questions please contact us on 0300 330 1342.

Name of manager

Manager's job title

#### About the applicant's social care employer

Name of social care employer

Address

Contact phone number

#### About the employee

Employee's name

Employee's job title

#### Declaration

- I declare that I am the line manager of the applicant named above and that the applicant is not receiving any support from the social care organisation shown above.
- I understand that if I give the NHSBSA false, misleading or incomplete information, the applicant named above may be refused financial support or any current financial support may be withdrawn resulting in an overpayment for the applicant and I may be prosecuted.
- I agree to be contacted by the NHSBSA so they can verify the employment status and any support arrangements of the applicant named above.

Signature

Date

## 7. Additional information

Use this space if you need to continue any of your answers or if there have been any changes which may affect your bursary application such as changes to your course/course attendance (e.g. repeat study etc).

If you need to continue any of your answers, please indicate clearly which questions you are continuing.

## 8. Data Protection

### Data Protection Act 1998

The NHSBSA will use the information that you have provided for the assessment of your application and for the prevention and detection of fraud. We may contact you to discuss your application and our quality of service to you by any methods you have provided. Your personal data will be deleted from our systems and files no later than seven years after the month in which your application is assessed. We will not disclose your personal data to any third party unless they have a lawful right obliging us to do so other than:

- universities/colleges
- local authorities
- organisations from which you receive benefits, bursaries, grants or support
- the Home Office
- Student Finance England
- the Student Loans Company
- HM Revenue & Customs

We will not transfer your personal data outside the European Economic Area.

### Third party authorisation

Due to data protection, we are only able to discuss your bursary and other personal details with you and the organisations listed above.

If you would like to authorise another person, such as a parent, to discuss your bursary, please fill in their details below. We will verify their details if the person contacts us. You must sign the applicant's declaration in order for the third party authorisation to take effect and to indicate that you have sought the person's permission for us to contact them.

Third party's first name

Third party's last name

Third party's date of birth

(This will be used as a security question.)

Relationship between you and the third party



## 9. Applicant's declaration

**Read this declaration carefully before signing it. If you choose not to sign it, we will be unable to assess your application for a Social Work Bursary.**

**I declare that:**

- A I will be/am taking an undergraduate social work course which is eligible for the Social Work Bursary.
- B I have read and understood the application instructions in full.

**By signing this declaration I agree to the following conditions:**

- C I understand that Social Work Bursaries are subject to capping, that my university/college are responsible for allocating capped places and that even if I am eligible for a bursary, I may only receive a Placement Travel Allowance if my university/college do not nominate me for a capped place.
- D I will supply any additional information which might be reasonably required by Social Work Bursaries to verify information I have given on this form.
- E I will inform Social Work Bursaries immediately of any change in circumstances that might affect my entitlement to financial support or Social Work Bursaries records relating to me, including but not limited to:
  - withdrawing, suspending, deferring or interrupting the course temporarily or permanently for any reason, regardless of whether I intend to return
  - changing my study pattern from full-time to part-time, or vice versa
  - taking a year or term out from study
  - changing the account I want my payments made to
  - changing address
  - gaining support from a publicly funded body (excluding Student Finance Direct, Access to Learning Fund, government benefit agencies and bursaries from my university) or an employer
- F I accept that Social Work Bursaries will immediately terminate or suspend my funding if:
  - I withdraw, suspend, defer or interrupt the course temporarily or permanently for any reason, regard less of whether I intend to return
  - I take a year or term out from study
  - Social Work Bursaries determines in its absolute discretion that it is reasonable for it to do so
  - I gain support from a publicly funded body (excluding Student Finance Direct, Access to Learning Fund, government benefit agencies and bursaries from my university) or an employer
  - Social Work Bursaries in its absolute discretion determines that I am no longer entitled to financial support
- G Social Work Bursaries are committed to administering entitlement accurately. I agree to pay back to Social Work Bursaries within 30 days of receiving notification any excess payment, fees and any other charges, in the event of the following circumstances:
  - changing my study pattern from full-time to part-time
  - withdrawing, suspending, deferring or interrupting the course temporarily or permanently for any reason, regardless of whether I intend to return

- being unable to attend the course for any reason where it exceeds 15 calendar days in total
- taking a year or term out from study
- being overpaid because I have failed to inform Social Work Bursaries of a change in my circumstances
- where Social Work Bursaries at its absolute discretion determines I have been given financial support to which I am not entitled
- gaining support from a publicly funded body (excluding Student Finance Direct, Access to Learning Fund, government benefit agencies and bursaries from my university) or an employer.

Should I fail to make full repayment of any amount due or agree an acceptable repayment plan with Social Work Bursaries, I agree the debt may be passed to a debt collection agency. I agree that I will be charged for any additional recovery costs at the rate of 7% which will be added to the balance outstanding on referral.

H I consent to the disclosure of information on this form for the purposes of verification and, in compliance with the Data Protection Act, to and from other organisations including:

- Universities
- Local Authorities throughout the United Kingdom
- organisations from which I am receiving benefits, bursaries, grants or support
- Social Work Bursaries software suppliers
- the Department for Work and Pensions
- the Home Office
- HM Revenue and Customs

I consent to the disclosure of information to and by the organisations detailed in the section entitled 'Student's income and expenses' of this form for the purposes of verification of income information provided on this form.

I understand that the administration of Social Work Bursaries and responsibility for counter fraud and security management are both responsibilities of the NHS Business Services Authority. I understand that Social Work Bursaries may share the information on this form with NHS Protect for the purposes of the prevention, detection, investigation and prosecution of fraud or any other unlawful activity.

I I understand and accept that if I fail to give sufficient notice of any change to my bank or building society account details, or provide incorrect details, Social Work Bursaries cannot take responsibility for payments made to an incorrect account, delayed payments or non-payment of the bursary.

I understand and accept that the terms and conditions (including rates) of the bursary may change at any time without notice, and the scheme is subject to continued government funding, which may cease at any time without notice.

I declare that the information given on this form and in any supporting documents provided is complete and accurate. I understand and accept that if I provide Social Work Bursaries with false or misleading information, financial support may be refused or withdrawn and I may be liable to prosecution and/or civil proceedings.

Applicant's full name

Applicant's signature

Date

## 10. Posting your application to us

- Keep** a photocopy of all documents sent for your own records. The NHSBSA cannot take responsibility for applications and evidence lost in the post.
- Attach** a pre-paid, self-addressed Special Delivery envelope if you are sending supporting documents to us, so we can return them to you securely and you can track them once they leave us. If you do not provide this we will return your documents by second class post.
- Pay** the correct postage and write your name and address on the back of the envelope to avoid your mail going astray.
- Post** If you are sending your application by Special Delivery, make a note of your Special Delivery reference number.

Post this form by Special Delivery to guarantee it is delivered to:

Social Work Bursaries  
PO Box 141  
Hesketh House  
200-220 Broadway  
Fleetwood  
FY7 9AS

### Document list

List all of the original documents you are sending with your application and fasten your documents to this page.

We will use this list to check that we have received all of your documents.

**For office use  
only**



## 11. Checklist

Use the checklist below to make sure that your application is complete.

Have you read the application instructions that accompany this application form?

Yes       No

Have you kept a copy of your application form and the instructions for future reference?

Yes       No

Have you answered all of the applicable questions in each part of this application?

Yes       No

Have you securely attached all original evidence we have asked for?

Yes       No

Have you securely attached your original Student Finance England financial notification from the **first year** of your course to this application (if applicable)?

Yes       No       Not applicable

Have you included a pre-paid, self-addressed, Special Delivery envelope for the return of your original documents?

Yes       No       Not applicable

If applicable, has your social care employer completed, signed and dated the employer declaration?

Yes       No       Not applicable

If applicable, have you enclosed a completed retainer declaration?

Yes       No       Not applicable

Have you signed and dated the applicant's declaration?

Yes       No

Are you sending your application by Special Delivery post?

Yes      Make a note of your Special Delivery reference number

No

## Social Work Bursary Equality Monitoring questionnaire

NHS Business Services Authority (NHSBSA) Policy

Please provide us with some information about yourself. We do this to make sure that our services are being accessed by everyone who is entitled to use them. It is not compulsory to do so, but you can be assured that all the information you do provide will be kept completely confidential. No identifiable information about you will be passed on to any other bodies, members of the public or press.

**1. Which university/college are you studying at?**

**2. Which course are you undertaking?**

**3. Which academic year is this application for? Tick one box only.**

2017/18     Other    Please state:

**4. Do you wish to declare information about your status?**

NB: We will only use this information to monitor the diversity of applicants. It will not be linked to or stored against your personal details and will not be used for any other purpose.

Yes    Go to Question 5

No    Go to Question 12

**5a. Current gender identity (how do you describe yourself?)** Tick one box only.

Male     Female     Other     I would rather not say

**5b. Is your gender identity the same as the gender you were assigned at birth?**

Yes     No     I would rather not say

**6. Which age group applies to you?** Tick one box only.

16-24 years     25-34 years     35-44 years     45-54 years

55-64 years     65 years and over     I would rather not say

**7. What is your marital status?** Tick one box only.

Single     Cohabiting     Married     Civil partnership

Separated     Divorced     Widowed     I would rather not say

**8. What is your ethnic group?** Tick one box only.

This is about the ethnic group to which you feel you belong and not about citizenship or nationality. If you feel you belong to more than one ethnic group, please choose the one you feel you most belong to or choose the 'Mixed background' option.

**A. White:**

British  Irish  I would rather not say

Any other white background Please state

**B Asian or Asian British:**

Bangladeshi  Indian  Pakistani  I would rather not say

Any other Asian background Please state

**C Mixed:**

White and Black Caribbean  White and Black African  White and Asian

I would rather not say  Any other mixed background Please state

**D Black/Black British**

Caribbean  African  I would rather not say

Any other Black background Please state

**E Other ethnic group**

Chinese  I would rather not say

Any other ethnic group Please state

**9. Which of the following best describes your sexual orientation?** Tick one box only.

Lesbian  Gay  Bisexual  Heterosexual/straight  I would rather not say

Other Please state

**10. What is your religion or belief?** Tick one box only.

Atheism/no religion  Buddhism  Christianity or Christian denominations  
(including Church of England, Catholic, Protestant and all other Christian denominations)

Hinduism  Islam  Jainism  Judaism  Sikhism

I would rather not say  Other Please state

**11a. Are your day to day activities limited because of a health problem or disability which has lasted, or is expected to last, at least 12 months?** Tick one box only.

Yes, limited a lot     Yes, limited a little     No     I would rather not say

**11b. If 'Yes', is your disability with regard to any of the below?**

Long-term illness/health condition     Learning Disability / Difficulty     Sensory Impairment  
 Mental Health Condition     Physical Impairment     I would rather not say  
 Other    Please state

**12a. Do you have caring responsibilities for any children or adults?**

Yes     No

**12b. If yes, please tick which apply.**

Child(ren)     Adult(s)

**12c. If yes, are you a registered carer?**

Yes     No

**13a. Are you pregnant?**

Yes     No     I would rather not say

**13b. Have you given birth within the past 26 weeks?**

Yes     No     I would rather not say

**14. Please enter your occupation before the start of your course.**

**Send this form to us with your completed bursary application.**

**Thank you for providing your information.**