

Social Work Bursary: Academic Year 2018/19 (For courses starting between January 2019 and March 2019) 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 commencing Year 1 of an undergraduate social work course from September 2018, please do not complete this form.

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

Part 1 - Your details

You must complete all relevant sections in full. Failure to do so will result in a delay in processing your application.

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.

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 (ensure you give as much information as possible in this section)

Applying for a Social Work Bursay for the first time

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/social-work-students/check-your-eligibility

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.

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 this academic year. 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 our privacy policy which is available in part 8 of the form.

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

It's important that 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 are advised to send any valuable documents to us through a secure postal method such as Special Delivery.

You should also enclose a self-addressed, pre-paid envelope for the return of your documents. If you decide to use a secure postal method such as Special Delivery for this purpose this will allow you to track the return of your documents once they leave us. If you do not include a pre-paid or 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 2018/19

Application form 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 which includes PTA if you are nominated for funding by your university/college.

1. Your details

1.1 About you

, ,	or have you ever received a bursary (in full or part) from the NHS Business), General Social Care Council (GSCC) or the Central Council for Education (CCETSW)?
No Yes Give y	our bursary reference number
(Your b	oursary 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 when you register.
Title	Mr Mrs Ms Other
Surname or family name	
First name	
Other names	
Previous names	
Date of birth	
Address	
Preferred telephone number	
Email	
Marital status	Single Separated Widowed Divorced
	Cohabiting Married Civil partnership
Date of marriage/registration	n 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 qu	alifications.

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 university based?				
University based Employment based				
You are not eligible for a Social Work Bursary - do not complete this form.				
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 2018/19 1st year				
You are not eligible for a Social Work Bursary - do not complete this form				
2nd year				
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 repeat any part of your course in the academic year 2018/19?				
No Don't know Inform us in writing of details when you know – go to part 3				
Yes 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.

A	
Name account held in This must be in your name	
·	
Account details	
Bank/building society name	
Branch address	
branch address	
D 14 111 11 11 11 11 11 11 11 11 11 11 11	
Bank/building society sort code	
Account number	
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	2017/18	
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Did yo	u recei	ve a social work bursary in the academic year 2017/18?
	No	please complete the sections below
	Yes	Go to part 5 of this form
4.2	Perso	nal Eligibility - to be completed by all students
	nce rule	for a Social Work Bursary, all students, regardless of nationality, must meet certain es. Please answer the following questions in order for us to determine your
This f	orm w	ill be returned to you if you do not complete each section.
Are yo	ou a:	
	UK na	tional - Remember to enclose your most recent Student Finance England award notification or passport.
	non-U	K EU/EEA/Swiss national - Remember to enclose your most recent Student Finance England award notification, your passport or your National Identity Card.
	non-U	K, non-EU/EEA/Swiss national - Remember to enclose your most recent Student Finance England awar 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	То

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	То

Provide details of any employment you have undertaken in the UK

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

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	То

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. You must provide a copy of the contract with your application.
Have you maintained a home in the UK? Yes No
Any further information regarding your absence from the UK:

4.3 Non-UK nationals

Leave to remain

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								
If your immigration status is linked to another person (e.g. you are the family member of an EEA National or refugee) please provide that persons details here								
What is your relationship	p to this pe	rson?						
Imigration status	Student	Parent/ step parent	Spouse/ civil partner	Date of application	Date granted	Expiry date		
EU National				N/A	N/A	N/A		
EEA/Swiss National				N/A	N/A	N/A		
Asylum seeker					N/A	N/A		
Refugee								
Indefinite leave to remain						N/A		
Humanitarian protection								
Student Visa								
Limited leave								

5. Other grants, bursaries, retainers or support

	•	Bursary? Do not include applications from Student Finance England.
	No	Go to Part 6
	Yes	Give details. If you need more space, use part 7 of this application form.
Name	of org	anisation you have applied to/are receiving funding from
If you a	re apply	grant, bursary, retainer or other support ing for or receiving a retainer, you must complete a bursary retainer declaration. Download a copy from our w.nhsbsa.nhs.uk/social-work-students/apply-postgraduate-bursary and send it with your application.
Dates	of supp	port
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?

				claration. Print a copy from our well send it with your application.	bsite at:
No	Go to part 7				
Yes	You must ask your line	e manager to complete the	e following	declaration	
6.2 Social ca	are employer's dec	claration – to be com	pleted k	oy your employer	
not receivingsponsorsany paidall or parany pract	g this section you a any of the followin hip/support time off to allow the of their tuition feetice learning opport	ng: nem to attend studies	other fina		nd is
The person	who completes th	nis declaration must	be the a	pplicant's line manager.	
If you have a	ny questions please	contact us on 0300 3	30 1342		
Name of mar	nager				
Manager's jo	b title				
About the a	pplicant's social c	are employer			
Name of soci	al care employer				
Address					
Contact pho	ne number				
About the e	employee				
Employee's n	ame				
Employee's jo	ob title				
receivingI understanamed ak resultingI agree to	any support from the and that if I give the pove may be refused in an overpayment	he social care organisa NHSBSA false, mislea d financial support or for the applicant and I ne NHSBSA so they car	tion show ding or in any curre may be	ncomplete information, the a ont financial support may be v	pplicant vithdrawn

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

Privacy notice

The NHS Business Services Authority (NHSBSA) is responsible for this service.

Why we process your information

We will use the information you provide to:

- process your application for payment,
- detect and prevent fraud and mistakes and
- analyse general trends and correlations to support more effective planning of NHS services.

By law we must process this information on behalf of the NHS.

Your information will not be transferred outside the *European Economic Area*.

Sharing your personal information

To prevent, detect and investigate fraud and errors, we may share your information to check the records of:

- Higher Education Institutions
- HM Revenue and Customs
- The Home Office
- Student Loans Company
- Bodies performing functions on behalf of the above organisations

Information may be shared with the Department of Health and Social Care for the purposes of investigating and prosecution of fraud, or any other unlawful activity affecting the NHS.

Information may be shared with the Cabinet Office in relation to the National Fraud Initiative, which matches electronic data within and between public and private sector bodies to prevent and detect fraud.

Anonymised information relating to your equality and diversity may also be shared with the Department of Health and Social Care to monitor the compliance with Equality law.

Keeping your personal information

Your personal data will be deleted from our systems and files no later than seven years after your final payment has been completed.

Your rights

The information you provided will be managed as required by Data Protection law including the General Data Protection Regulations (GDPR).

You have the right to:

- receive a copy of the information the NHSBSA hold about you
- request your information be changed if you believe it was not correct at the time you provided it

From the 25 May 2018 you have the right to:

 request that your information be deleted if you believe the NHSBSA are keeping it for longer than necessary

Find out more about your rights and how we process information www.nhsbsa.nhs.uk/our-policies/privacy.

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.)	
(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:

- I understand that Student Services 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 Student Services to verify information I have given on this form.
- E I will inform Student Services immediately of any change in circumstances that might affect my entitlement to financial support or Student Services 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 Student Services will immediately terminate or suspend my funding if:
 - I withdraw, suspend, defer or interrupt the course temporarily or permanently for any reason, regardless of whether I intend to return
 - I take a year or term out from study
 - Student Services determines in its absolute discretion that it is reasonable for it to do
 - 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
 - Student Services in its absolute discretion determines that I am no longer entitled to financial support
- G Student Services are committed to administering entitlement accurately. I agree to pay back to Student Services 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 Student Services of a change in my circumstances
- where Student Services 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 Student Services, 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:
 - Higher education institutions
 - 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 Student Services and responsibility for counter fraud and security management in the NHS are both responsibilities of the NHS Business Services Authority. I understand that NHSBSA Student Services may share the information on this form with the NHS Counter Fraud Authority (NHSCFA) for the purposes of the prevention, detection, investigation and prosecution of fraud or any other unlawful activity affecting the NHS.

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, Student Services 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 Student Services 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

Кеер	responsibility for any items lost in the post.	cannot take
Enclose	a pre-paid, self-addressed envelope if you are sending supporting docu you are advised to use Special Delivery as this enables us to return your securely and you can track them once they leave us. If you do not provi return your documents by second class post.	documents
Pay	the correct postage and write your name and address on the back of th your mail going astray.	e envelope to avoid
Post	If you are sending your application by Special Delivery, make a note of t number so that you can track your documents.	the reference
	Post this form to:	
	Social Work Bursaries PO Box 141 Hesketh House 200-220 Broadway Fleetwood FY7 9AS	
Document	: list	
List all of the this page.	ne original documents you are sending with your application and fasten yo	ur documents to
We will use	e this list to check that we have received all of your documents.	
		For office use only

11. Checklist

Use th	ne checkli	st bel	ow to m	ake su	ure that your application is complete.
Have	you read	the a	oplication	n instr	ructions that accompany this application form?
	Yes		No		
Have	you kept	а сор	y of your	r appli	ication form and the instructions for future reference?
	Yes		No		
Have	you answ	ered a	all of the	appli	cable questions in each part of this application?
	Yes		No		
Have	you secur	ely at	tached a	ll orig	inal evidence we have asked for?
	Yes		No		
					riginal Student Finance England financial notification from the first tion (if applicable)?
	Yes		No		Not applicable
docur	ments?				addressed, Special Delivery envelope for the return of your original eturned by second class post if you do not provide this)
	Yes		No		Not applicable
If app	licable, h	as you	ır social d	care e	mployer completed, signed and dated the employer declaration?
	Yes		No		Not applicable
If app	licable, h	ave yo	ou enclos	sed a c	completed retainer declaration?
	Yes		No		Not applicable
Have	you signe	ed and	dated t	he app	plicant's declaration?
	Yes		No		
If app	olicable, h	ave yo	ou enclos	sed a c	completed retainer declaration?
	Yes		No		Not applicable



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 universi	ty/college are you st	tudying at?			
2.Which course a	are you undertaking	?			
3. Which academ	nic year is this applica	ation for? Tick o	one box only	<i>.</i> .	
2018/1	9 Other P	lease state:			
NB: We will only use t	o declare information this information to monitor will not be used for any other.	the diversity of appli		t be linked to or stored agains	t your
Yes Go to 0	Question 5				
No Go to C	Question 12				
5a. Current gend	ler identity (how do	you describe yo	ourself?) Tick	k one box only.	
Male	Female	Other	I would	I rather not say	
5b. Is your gende	er identity the same	as the gender y	ou were ass	igned at birth?	
Yes	No	I would rati	her not say		
6. Which age gro	oup applies to you?	ick one box only.			
16-24 years	25-34 year	s 35	5-44 years	45-54 years	5
55-64 years	65 years ar	nd over I v	vould rather r	not say	
7. What is your r	marital status? Tick o	ne box only.			
Single	Cohabiting	M	arried	Civil partnership	
Separated	Divorced	\square w	idowed	I would rather not sa	ay

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 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
 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

has lasted, or is	s expected to last	, at least 12 months? Tick one box	conly.
Yes, limited a lot	Yes, limited	a little No l wo	ould rather not say
11b. If 'Yes', is you	r disability with r	egard to any of the below?	
Long-term illness/he	ealth condition	Learning Disability / Difficulty	Sensory Impairment
Mental Health Cond	dition	Physical Impairment	I would rather not say
Other	Please state		
12a. Do you have ca	ring responsibilit	ies for any children or adults?	
Yes	No		
12b. If yes, please ti	ck which apply.		
Child(ren)	Adult(s)		
12c. If yes, are you	a registered carer	?	
Yes	No		
13a. Are you pregna	ant?		
Yes	No	I would rather not say	
13b. Have you giver	n birth within the	past 26 weeks?	
Yes	No	I would rather not say	
14. Please enter yo	ur occupation be	fore the start of your course.	
Send this form to us	with your compl	eted bursary application.	
Thank you for provi	ding your inform	ation.	

11a. Are your day to day activities limited because of a health problem or disability which