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| **Dumfriesshire Educational Trust – Supplementary Bursaries****APPLICATION FORM 2024** |

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| **For our use only** |
| Date received |  |
| Reference | DET/SUPP24/ |

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**This application form is for students about to enter university for the 2024/25 academic year**.

**For Supplementary Bursaries only applications from applicants who meet ALL of the following criteria will be considered:**

* **Normally resident in Dumfriesshire**
* **Educated in Dumfriesshire for a minimum of 5 years**
* **Enrolled in further of higher education (college or university)**
* **Have secured a Student Awards Agency for Scotland (SAAS) household income related bursary for the 2024/25 academic year (you must attach proof of SAAS bursary award)**

 Section 1 – About you

* 1. Please complete this section with your personal details. We will contact this person about your application, and they should also sign the declaration in Section 3.

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| Your title (please tick): | **Mr** [ ]  **Mrs** [ ]  **Miss** [ ]  **Ms** [ ]  **Other** [ ]  |       |
|  |  |
| Your name: |       |
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| Your addressand postcode: |       |
|  |  |  |  |
| Your daytime or mobile phone number: |       |
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| Your email address (please do not use your school glow email address): |       |
|  |  |
| Date of birth: |       |
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| Place of birth: |       |
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| Current or most recent school: |       |
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| Any other schools attended in the last 5 years (names and dates): |       |

We prefer to contact you by email. If you have provided an email address above, please tick to confirm that you check the mailbox regularly. [ ]

* 1. Please complete this section with your parent or guardian’s details.

|  |  |
| --- | --- |
| Parent or guardian’s name: |       |
|  |  |
| Parent or guardian’s addressand postcode (if different from above): |       |
|  |  |  |  |
| Parent or guardian’s daytime or mobile phone number: |       |
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| Parent or guardian’s email address: |       |

1.3 Name of university to attend.

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| **Name of university / college** |       |
| **Name of course** |       |
| **Duration of course (years)** |       |
| **Start date (MM/YYYY)** |       |

* 1. Please provide a brief description of the course.

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1.4 Please outline the total cost of your activities in relation to this grant application. All costs detailed **must** be eligible in line with the relevant criteria and financial year. If

Please be as detailed as possible, listing items as individually as possible e.g. books, equipment, travel, etc.

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| **Item** | Cost (£) |
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**Section 2 – Bank details**

Give details of the bank or building-society account we should pay your funding into. We prefer to make payments electronically (by BACS), so we need your account details to do this.

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| **Name of bank or building society:** |       |
|  |  |  |  |
| **Address of bank** **or building society:** |       |
|  |  |  |  |
| **Sort code:** |       | **Account number** (if you have a bank account) **or roll number** (building-society account): |       |
|  |  |  |  |
| **Account name:** |       |

**Section 3 – Declaration**

**Make sure that you understand the conditions of the following declaration before you sign it.**

* As far as I know, the information in this form is true and accurate. I understand that it may be a criminal offence to receive funding after giving false information, in which case you will cancel the funding and claim back any money I have received. I agree that you can check, with others, the information on this application form and any supporting documents. If you award funding based on the information in this form, I confirm that the activities I carry out will be as described in this form. I agree that you, or your appointed agents, can examine any documents necessary to show that the activities have been carried out. I will meet all your funding conditions shown in the award letter you send me.
* I agree that if there are any changes in the activities not agreed in writing with you, or if the activities do not go ahead for any reason, you can claim back all or part of any funding you have paid, as appropriate.
* I agree that you may make the information I have given on this form available to the public, and you may use it for publicity purposes.

**The person named in answer to question 1.1 of this form must sign and date the application.**

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| Please give the full name of the applicant as at question 1.1. |       |

**Please make sure you sign in blue ink so we can clearly see this is an original signature.**

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| Your signature: |  | Date: |       |

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| Your name (please print): |       |

**Privacy Notice**

**Dumfriesshire Educational Trust Bursaries and Grants**

Dumfriesshire Educational Trust is a Scottish charity (Dumfriesshire Educational Trust Scheme 1961, charity number SC003411). It is governed by “The Governors of the Dumfriesshire Educational Trust” and administered by Dumfries and Galloway Council.

Dumfries and Galloway Council is the data controller of your personal information. This means we decide why and how we will process your personal information. This privacy notice will provide you with the information you need to know about what we will do with the personal information you provide us with.

* The Council is collecting your name, postal address, phone numbers, email address and bank details to be able to process your grant application.
* The legal ground for collecting your information is for the performance of a contract. Without your personal information we would be unable to enter into a funding agreement/contract with you.
* We will share your information with Officers and Elected Members of Dumfries and Galloway Council and other relevant partners, including Community Planning Partners to help us assess your grant application and reach a decision. We may also contact those mentioned in your application for verification or further information to assist with our assessment, including funders and those promoted as supporting your project application.
* Your information will be held in the Council until the termination of any contract/agreement plus five years. Should your grant application be unsuccessful, your information will be held in the Council for one year after the decision letter or any further final correspondence has been issued.

You have the right to:

* **Be informed** about how your personal information will be used
* **Access** your personal information
* **Withdraw consent** where the legal ground for collecting your personal information is consent
* **Rectify** your personal information, which means they have the right to request the Council to correct any inaccuracies
* **Request deletion** of your personal information where the Council no longer has a legal ground to hold your information
* Request that the processing of your personal information is **restricted**
* **Data portability**, this means you can securely move your personal information from one IT place to another
* **Object** to the Council processing your personal information
* Know when the processing of your personal information is **subject to automated decision-making and profiling**

It would be helpful if you change your telephone number, email or address, to contact us and we can update your personal information.

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| **Our contact details:**The Clerk to Dumfriesshire Educational TrustMilitia HouseEnglish Street, Dumfries DG1 2HR **Email** DET@dumgal.gov.uk **Phone** 030 33 33 3000 | **The contact details of the Council’s Data Protection Officer:**Data Protection Officer Dumfries and Galloway Council Council Headquarters English Street, Dumfries DG1 2DD **Email** dataprotection@dumgal.gov.uk **Phone** 01387 260315 |

**Please email your form and documents to:**

DET@dumgal.gov.uk