THE UNIVERSITY CHILDCARE SUPPORT FUND – APPLICATION FORM 2019/20

1. PERSONAL DETAILS			
University Student Number: (USN)		ırname:	Title:
First Name(s):	Nationality:	Email:	
College:	_Current course (BA, PhD, etc):	Subject:	
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 – Num	ber of weeks to submission:		
Is your partner with you i	n Cambridge? Yes	No	I am single
Partner/spouse's full name:		_Nationality:	
Partner/spouse is:			
working full-time	working part-time (no. of hrs per week)	a student	unemployed
2. DETAILS OF YOUR HOUS	SEHOLD INCOME PER YEAR		

2.1 Income for Maintenance

Source of income	Applicant per year	Applicant's partner per 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		
Please detail any loans/credit arrangeme	nts (for both you and your partner):	
Loan value (total)		
Purpose of loan (i.e. housing, rent, car, li	ving costs, or other)	
Repayment period of loan (in years and r	nonths)	
Cost per annum to repay the loan		
For Office Use Only		
Date Received	Date Processed	Signed

2.4 Family's Welfare Benefits/Tax Credits

Child Benefit	£	per week/per month (delete as appropriate)
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 month

2.5 Describe any additional income, including from capital investments, trusts or subletting:

2.6 Have you applied for/received financial support from yo	
Was it granted? Yes / No How much is received/expected?	
What was the financial support for? (i.e. general hardship, a con	ntribution towards rent, childcare costs or other):
2.7 If you are a self-financed student, do you pay fees from	the income detailed above? Yes / No
2.8 If you pay fees from this income, how much do you pay	? University fees: £ per year
	College fees: £ per year
(PLEASE NOTE: It is very important fer	es are completed accurately for assessment purpose
2.9 If your partner is a student, which Institution and Colleg	e do they attend?
Have they applied for childcare funds from their institution?	Yes / No
If 'Yes', what award is received/expected for the year? \pounds	If 'No', explain circumstances:
2.10 Have you and your partner applied for all loans/grants	for which you are eligible? Yes / No
If 'No', please explain the circumstances:	
If 'No', please explain the circumstances:	
If 'No', please explain the circumstances:	vard (formerly Childcare Hardship Fund)? Yes / No
If 'No', please explain the circumstances: 2.11 Other funding (<i>delete as appropriate</i>) Have you/your partner received a Childcare Support Fund Aw If 'Yes', give details: Amount received £ Date	ard (formerly <i>Childcare Hardship Fund</i>)? Yes / No
If 'No', please explain the circumstances: 2.11 Other funding (<i>delete as appropriate</i>) Have you/your partner received a Childcare Support Fund Aw If 'Yes', give details: Amount received £ Date Have you/your partner received a Central Childcare Bursary A	rard (formerly <i>Childcare Hardship Fund</i>)? Yes / No e of award (dd/mm/yy):// Award before? Yes / No
If 'No', please explain the circumstances: 2.11 Other funding (<i>delete as appropriate</i>) Have you/your partner received a Childcare Support Fund Aw If 'Yes', give details: Amount received £ Date Have you/your partner received a Central Childcare Bursary A If 'Yes', give details: Amount received £ Date	rard (formerly <i>Childcare Hardship Fund</i>)? Yes / No e of award (dd/mm/yy):/ Award before? Yes / No e of award (dd/mm/yy):/
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1 st Child	Name:	Date of birth (dd/mn	n/yy)://	Age:		
(e.	of childcare g. nursery, ildminder)	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/mn	n/yy)://	Age:		
(e.	of childcare g. nursery, ildminder)	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/mn	n/yy)://	Age:		
(e.	of childcare g. nursery, ildminder)	Name of childcare provider (include OFSTED No.)	Childcare start & expected end date	hours/ week	weeks/ year	Annual cost
						£
						£
			Total 3 rd Child:	2		
		CHILDCARE COSTS GI	RAND TOTAL: £			
4. <u>DETA</u>	LS OF OTHER E	XPENDITURE PER MONTH				
Please pro	vide details of any	y other major monthly outgoings/c	commitments for you	and your	family.	
Rent/mortgage payments				£		
Household bills (e.g. council tax, electricity, gas, telephone, internet)		£				
Living costs (e.g. groceries, clothing, baby supplies)		£				
Loan Repayments (if applicable)			£			
Transport costs in the UK			£			
Fieldwork costs (if applicable)			£			
	o dotailo of any of	har avaanditure that you would wis	h to bo takan into a	poidoratio		
loan or deb	ot repayments. Co	her expenditure that you would wis osts incurred relocating to the UK o exceptional circumstances.				

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.

applicant who is overrunning.

I confirm that the information given is correct and comple	te 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: Students, Childcare Office, 21 Trumpington Street, Cambridge	
	July 2019
Data protection The personal information about your family circumstances that you provide on this fo application. It will be treated in strictest confidence and will only be disclosed to staff about how we handle your personal information, and your rights under data protection https://www.information-compliance.admin.cam.ac.uk/data-protection/general-data.	of the University and your College, if appropriate. For more information