## Disabled Students' Allowance (DSA) Only application 2024-2025

#### The closing date for applications is 31 March 2025

DSA is a fund to support disabled students and those with additional learning needs who are studying higher education and may have extra costs because of their impairment.

For more information or alternative formats, visit <a href="www.saas.gov.uk">www.saas.gov.uk</a>, email us at <a href="SAAS\_4@gov.scot">SAAS\_4@gov.scot</a> or call us on 0300 555 0505.

If you receive postgraduate funding from a Research Council or other UK funding body, you cannot apply for DSA.

#### **Full-time students**

You can fill in this form if you:

- meet our residence conditions
- are studying an undergraduate or postgraduate course that we support
- are studying a diploma or degree in paramedic, nursing and midwifery
- are not applying to us for your tuition fees, loan, bursary, and any applicable living-costs grants

#### Part-time students

You can fill in this form if you:

- meet our residence conditions
- are working towards at least 50% of a full-time higher education qualification, such as an HNC, HND, degree or postgraduate. For Open University, this means at least 60 credits in each academic year
- are studying a course which lasts for more than one academic year but is not 2 times longer than the
  full-time version. For example, if it takes 2 years to complete your course full-time, you must take no
  longer than 4 years to complete it part-time

You should complete sections 1 to 7 and your advisor should complete sections 8 and 9. Any missing information may delay your application.

If completing this form by hand, use black ink and BLOCK CAPITAL LETTERS and tick the boxes that apply.

#### Section 1 - Reference number

If you have previously applied for funding, including tuition fees only, enter your **8-digit SAAS reference number**, shown on your award.

## Section 2 - Personal details

Title	Mr	Mrs	Ms	Miss	Other		
First names							
Last name							
Name at birth, if different from above							
Date of birth							
Full address, including postcode							
Term-time address, if different from above							
Phone number							
Email address							
(you <b>must</b> enter this i	f you ha	ave one)	)				
National Insurance number (you <b>must</b> enter this if	<sup>f</sup> you ha	ve one)					
Bank details - provide already given us bank						our DSA, even if you	have
Sort code					Account number		

## Section 3 - About your disability or learning difficulty

For this section, tell us about your disability or learning difficulty, you can choose more than one option and there's an extra page at the end of the form to provide more information.

If you're applying for DSA for the first time, you should send evidence of your disability or specific learning difficulty. For example, a letter from your doctor or an educational psychologist's report.

#### What disability or specific learning difficulty do you have? Please tick all that apply.

I have a learning difficulty

I have a social or communication impairment

I have a long standing illness or health condition

I have a mental health condition

I have a physical impairment or mobility issues

I have a hearing impairment

I have a visual impairment

My disability is not listed

I have multiple disabilities

## Section 4 - Your residence

Section 4 - Tour re	siderice								
You only need to complete this section if you are applying to us for the first time or after a study break.									
What country were you born in?									
What is your nationality?									
What country do you permanently live in?									
When does your course start? Choose a period below, we will refer to this as the <b>relevant date</b> in other questions.									
1 Aug - 31 Dec	1 Jan - 31 Mar	1 Apr - 31 Jun		1 Jul - 31 Jul					
Have you lived in the UK cobefore your relevant date?	•	Yes	No						
If you answered <b>No</b> , tell us which country or countries you have been living in.									
Will you be ordinarily reside	ent in Scotland on your rele	vant date?	Yes	No					

If you answered No, complete the **Residence Form** and send it to us with this application.

Will you be living in Scotland for 1 year before your relevant date?

No

Yes

## **Section 5 – Education and employment**

You only need to complete this section if you are applying to us for the first time or after a study break.

#### **Education details**

In what country was the last school you attended?

What year did you leave that school?

Have you been in education at any time since leaving school?

Yes

No

If you answered **Yes**, give details of any college or university you have studied at since leaving school, including any time spent outside the UK. Use the extra page to provide more information.

Name of college or university including town

**Dates attended** 

Course

Full-time / Part-time

Qualifications

## **Employment details**

Provide details of your full or part-time employment for the last 3 years. Include details of any unemployment or time spent outside the UK. Use the extra page to provide more information.

Name of employer or enter unemployed

Job title

Years worked from / to

Town you lived in while working here

# Section 6 – Your course and college/university details (you must complete this section)

What college or university are you studying at?
What course are you studying?
What is the qualification level of the course? Such as HNC, degree etc.
For Open University students, give the details of the course(s) you'll be studying this year and the credits
Course Credits you expect to earn
Total credits
Are you studying full-time, part-time or distance learning?
When does your course start or resume?
How many years does your course take to complete?
What year are you applying for? For example, 1, 2, 3 and so on.

## Section 7 – Student declaration and agreement

#### Sign and date this section.

We make payments of Disabled Students' Allowance under the Students' Allowances (Scotland) Regulations 2022.

- all the information I have entered and submitted on this form is complete and accurate, to the best of my knowledge
- I will give SAAS any additional information or documents it may request to help SAAS process my application
- I will inform SAAS if my circumstances change that might affect any amount I have received, may receive, or had paid on my behalf. This includes getting public funding from elsewhere, not enrolling, or withdrawing from my course
- I understand that if I give SAAS false, incorrect, or incomplete information or my conduct is
  otherwise unsatisfactory, SAAS may withdraw my funding and I may be prosecuted and SAAS
  would seek repayment of any sums received to which I am not entitled
- I will repay any amount which I have received, or had paid on my behalf, which is more than the award that was due to me
- I need to spend the amount awarded, so I can complete my course
- I will send you receipts for all items that I purchase under the DSA
- I understand that the information I have provided will be used for the prevention, detection, investigation and reporting of crime and I understand SAAS will share this information with other bodies for these purposes

Sign (or type name if submitting	3
electronically)	

**Date** 

## Section 8 – Your support details

Your disabilities advisor should complete and sign this section with you.

Please tick one of the 4 boxes below.

This is my first application for DSA and I have already received a needs assessment.

This is my first application for DSA and I would like to arrange a needs assessment.

I have been assessed, but require a new needs assessment.

Ask your disability advisor to send a covering letter explaining why you require a new needs assessment.

I am a continuing student for 2023/24. I have received DSA before and have an approved needs assessment.

### Recommendations

Your disability advisor should complete the recommendations below.

- use amounts, do not enter 'to be confirmed'
- continue on a separate sheet if required

## Large items of equipment

I have included an itemized quote and recommend all items

Estimated cost £

## Non-Medical Personal Help (NMPH)

Non-Medical Personal Provider / Hourly rate, Hours per No. of weeks Estimated Help (NMPH) support type employed Helper including VAT week support required cost

**Estimated total cost** 

# Section 8 - Recommendations - continued

Rasic	allowance	for small	items	<b>Estimated</b>	cost
Dasic	anowance	ioi siliali	1101113	LSumateu	COSL

### **Travel expenses**

Starting location

End location

Return journey starting location

Cost per return journey

Number of return journeys per week

Number of weeks travel required

Total cost

If you're claiming taxi costs, include 2 taxi quotes or university/college contract quote.

#### Section 9 - Declaration

This section should be filled in by your assessor or disability advisor.

I can confirm any support that is set out in this claim is essential for this student to complete their course and to my knowledge, the details on the claim are correct.

Where a student is employing their own helper, I have discussed the available guidance with the student and I am happy that the non-medical person is suitable to undertake this role.

Part-time only - I confirm that

is working towards at least

% of a full-time equivalent higher education qualification.

Course start date

College or university name

Name of the assessor or disability advisor

Phone number of the assessor or disability advisor

Email address of the assessor or disability advisor

The information given is in line with the details the student gave when starting this course, and to my knowledge is correct

Signature of assessor or disability advisor (or type name if submitting electronically)

**Date** 

#### **Additional information**

If you need to	provide e	extra det	ails ab	out an	ything	relating	to this	application,	use t	he sp	ace
below.											

# Checklist. Ensure you and your disability advisor have provided the following:

Evidence of your disability if you are applying for DSA for the first time.

A copy of your needs assessment, if you are applying for DSA for the first time.

Completed all the sections on the form and signed the declaration on this page.

A copy of quotes for equipment or 2 quotes for taxis. This only applies to students applying for large equipment or travel expenses.

Please supply all the required information. Anything missing will delay your application.

Check all the information is correct and save the form to your device.

Upload your completed form to your **SAAS Account** using the Document Uploader.

#### **Data Protection**

We take our responsibilities for the way we store, secure and use your personal information seriously, and always seek to respect your privacy and to meet our legal obligations. These obligations include the General Data Protection Regulation, the Data Protection Act 2018, and other regulations and legislation relating to privacy and communications.

The information provided on this form will only be shared when it is necessary to do so to enable us to effectively provide and administer financial support under the Disabled Students' Allowance.

For details on how we use your information and who we may share your information with, visit our privacy policy at Student Privacy Statement (saas.gov.uk)

#### Our Privacy Policy explains:

- the purposes for which we use personal data and the legal basis for that use
- the categories of data we collect and how we acquire it, especially in those cases where it may come from another party
- our approach to sharing data and gives information about the organisations with whom we share data and why we do so
- your various rights and how to exercise them

If you require further information about how your information is processed, contact the SAAS Data Protection team at SAAS Data Protection Mailbox@gov.scot

## Fraud Statement - Prevention, Detection, Investigation and Reporting of Crime

SAAS is under a duty to protect the public funds it administers, and to this end will use the information you have provided on this form for the prevention and detection of fraud. We will also share this information with other bodies responsible for auditing or administering public funds for these purposes. SAAS participates in the National Fraud Initiative (NFI) data matching exercise. For further information, visit <a href="https://www.saas.gov.uk/about-saas/fraud-prevention">https://www.saas.gov.uk/about-saas/fraud-prevention</a>.

## **Fraud Prevention Agency Fair Processing Notice**

The personal information we have collected from you will be shared with fraud prevention agencies who will use it to prevent fraud and money-laundering and to verify your identity. If fraud is detected, you could be refused further funding from SAAS and certain services, finance or employment from other organisations.

You can also obtain a copy of the full fair processing notice by emailing <a href="SAASCFT@gov.scot">SAASCFT@gov.scot</a>. This will include further details on your data protection rights and how your information will be used by us and these fraud prevention agencies.

If you require a paper copy of the full privacy or fraud statements, contact us on 0300 555 0505.