



Student Awards Agency for Scotland

Gyleview House, 3 Redheughs Rigg, Edinburgh, EH12 9HH

Telephone: 0845 111 1711 Fax: 0131 244 5887 website: www.saas.gov.uk

Application for the Disabled Students' Allowance for eligible full-time students Session 2008-2009

Section A – Reference Number

Please supply your SAAS reference number (This appears on all the letters we send you).

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You should fill in this form if you have a disability and face extra costs for studying or attending your course. Fill in the form in CAPITAL letters using a **black** ballpoint pen. The accompanying DSA notes give advice about the Disabled Students' Allowance (DSA) for students studying a course of higher education. If you need help filling in your application or you are not sure what help you can claim for, you can contact the disability adviser at your institution. If you need more information you can visit our website, e-mail us at SAAS_4@scotland.gsi.gov.uk; or call us on 0845 111 0244. **If you would like an alternative version of our DSA literature in a format most suited to your needs, please contact us on 0845 111 1711.**

Under the Data Protection Act 1998, we will use the information you give on this form to process your application for the Disabled Students' Allowance. We have a duty to protect the public funds we handle, and we may use the information you have given us to prevent and detect fraud. We may also share this information for the same purpose with other organisations that handle public funds. You should read the DSA notes supplied with this form which give more detail on who will use the information you give on your form and what they will use it for.

Who should fill in this form?

You can fill in this form if you:

- are doing a full-time undergraduate or postgraduate course that we support; and
- will be applying to us for your fees and/or living-costs support (loans, bursary and grants).

If you are not sure what form to fill in please see page four of the DSA notes.

Important

Once we have confirmed that you are eligible to receive support from us, we can consider you for the DSA. This means that **we cannot process your DSA application** until we receive your application for your fees and/or living-costs support. The quickest and easiest way to apply is to visit www.saas.gov.uk and apply online. If you cannot apply on line you can download a form from our website. Alternatively, you can pick one up from your university or college or contact us and ask us to send you one.

Section B – Personal Details

Title (Mr, Mrs, Miss, Ms)

First names

Surname

Date of birth (for example 15/12/1988)

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Section C - Your disability or learning difficulty

If you are applying for the DSA for the first time, you must send supporting evidence of your disability, or specific learning difficulty. You only need to complete this section if you are applying for DSA for the first time, or if your disability or learning difficulty has changed.

What disability or specific learning difficulty do you have?

I am dyslexic.

I have a visual impairment.

I have a hearing impairment.

I use a wheelchair or have difficulties getting around.

I have a medical condition.

I have mental-health difficulties.

I have an unseen disability (e.g. diabetes, autistic spectrum disorder, epilepsy or asthma)

I have two or more of the disabilities or special needs above.
(Please give the details below.)

I have a disability or specific learning difficulty that is not listed above.
(Please give the details below.)

If you want to give us more information about your disability or specific learning difficulty, please do so here.

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Section D - support details

Please tick one of the three boxes below.

This is my first application for DSA and I have already received or arranged a needs assessment (see section 2 of the DSA notes) from my college or university. (Do **NOT** list your requirements in the boxes below).

This is my first application for DSA and I would like you to arrange a needs assessment (see section 2 of the DSA notes) for me from an Access Centre. (Do **NOT** list your requirements in the boxes below).

I am a continuing student who has received DSA before and I would like to claim DSA for 2008-09. (Please list the support you require in the boxes below. Please refer to section 4 of the DSA notes if you are not sure how to complete the boxes below. We can only pay for support that has been previously approved in a needs assessment).

Basic Allowance (small items)	Estimated Cost (£)
Total	£

Non-Medical Personal Help	Estimated Cost (£) and number of hours
Total	£

Large Items of Equipment	Estimated Cost (£)
Total	£

Section E – Declaration, agreement and student consent

Please make sure that you, your assessor or disability adviser have signed the declarations below before you send us the form. If you do not do this, we will have to return the form to you and there will be a delay with your application. You can only get support under the DSA for any equipment or help you need to complete your course.

Your assessor or disability adviser must fill in this section.

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

Name of institution
Name of assessor or disability adviser (print)
Signature of assessor or disability adviser Date...../...../.....

Official Stamp

You must sign and date this section.

Payments of Disabled Students' Allowance are made under the Students' Allowances (Scotland) Regulations 2007 (as amended).

- As far as I know the details I have given on this form are complete and accurate
- I need to spend the amount shown in this form, or which is shown in my needs assessment report, so I can complete my course.
- I will tell you immediately if my circumstances change in any way that might affect any amount which I have received, or had paid on my behalf.
- I understand that if I give you false information, or do not give complete information, you may prosecute me and withdraw the support.
- I agree to repay any amount which I have received, or had paid on my behalf, which is more than the award due to me.

We may prosecute you if you give false information.

Your signature Date/...../.....

You must read this section

Getting DSA support will be quicker and easier if you agree to the statement shown below. We **strongly** advise that you tick the check box, but you do not have to and we will still process your application.

I agree that SAAS, the disability adviser at my institution or college and my DSA assessor may exchange information about my application for the DSA, or other disability-related support, where this is necessary to assist in providing me with the disability support I need.