**JEWISH STUDENTS’ FINANCIAL GRANT**

**APPLICATION FORM**

**This application form has been designed jointly by a group of charities in the Jewish community to enable Jewish students to save time/effort by completing just one form to submit to multiple organisations. The Union of Jewish Students has brought together these organisations to increase efficiency and enable the financial resources of the charities to be maximised. The participating organisations are:**

* **Finnart House School Trust**
* **The Anglo Jewish Association**
* **The Jewish Widows’ and Students’ Aid Trust**

**For more information about the scholarships and criteria relating to each of these organisations, please refer to the** [**accompanying document**](https://d3n8a8pro7vhmx.cloudfront.net/ujs/pages/279/attachments/original/1581442597/Welfare_Grants'_Eligibility_Criteria.pdf?1581442597)**.**

**This application form must be completed by the intended recipient of the grant**

1. **Personal information**

Select every box that applies

|  |  |  |
| --- | --- | --- |
| 🞏 Self-identify as Jewish | 🞏 Jewish mother | 🞏 Jewish father |

|  |  |
| --- | --- |
| Surname:  …………………………………………………………. | First Name:  ………………………………………………………. |
| Date of Birth:  ………………………………………………………… | Gender:  ……………………………………………………... |
| Nationality:  ………………………………………..………………. | UK resident since:  ………………………………..……………………. |

Contact address:

…………………………………………………….………………………………………………………………………………….

|  |  |
| --- | --- |
| Email:  ………………………………………………………………. | Mobile number:  ………………………………………….…………… |

Dependants (relation and age): …………………………………………………………..

Details of any illnesses and/or disabilities- both relating to physical and/or wellbeing issues: …………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..

Details of Jewish community involvement (e.g. club and synagogue memberships, volunteer work) and other voluntary service/ interests:

……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………

1. **Education**

Education undertaken since age 16

|  |  |  |
| --- | --- | --- |
| Dates: | Institution attended: | Subjects studied and grades/qualifications achieved/predicted: |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

1. **Employment history**

Details of any paid employment, full or part time, or any military service, to the present day

|  |  |  |  |
| --- | --- | --- | --- |
| From: | To: | Organisation | Type of work/ Position held |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

If there are any gaps in your education or employment history, please provide further information: …………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………….

1. **Educational intentions – for what course are you applying that requires financial assistance?**

|  |  |  |  |
| --- | --- | --- | --- |
| Intended start date: | Name of institution: | Subject/course: | Duration: |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

Career aspirations (if known): ………………………………………………………………………………..…………………………………………………………………………

Details of any gap year (taken or intended): …………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………

1. **Financial circumstances of applicant**

**Estimated costs:**

|  |  |  |  |
| --- | --- | --- | --- |
| Tuition fees: | Food: | Accommodation: | Travel: |
| Books/ equipment: | Other expenses: | | |
|  | Total Costs | | |

**Income whilst at University/College:**

|  |  |  |
| --- | --- | --- |
| Earnings p.a.: | Savings: | Family contribution: |
| Loans (e.g. SFE): | Other grants (applied or obtained): | Other allowance (e.g. DSA) |
| Total income: | | |

**Debts** e.g. bank/ credit card loans: …………………………………………………………………………………………………..

1. **Personal statement**

No more than **400 words**. Please include reasons for educational and career aspirations, why you should be considered for the grant and, if awarded, the impact the grant would have.

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**Declaration**

I confirm that the information provided in this application form is accurate. I understand that the information in this form will be considered by the relevant charities. **I consent for these charities to process the information provided and note that they may share this information between themselves.** I understand that I may withdraw my consent to process the information provided at any time and, if I do so, the charities may be unable to continue providing charitable services to me. I undertake to notify the charities of any material change to the information provided in this form.

Signed by:

Print Name:

Date:

**I am applying to (please tick the box):**

AJA/UJS Welfare Grant

Finnart House School Trust

The Jewish Widows’ and Students’ Aid Trust

Return completed form to the charities where you are eligible. Information about this can be found [here](https://d3n8a8pro7vhmx.cloudfront.net/ujs/pages/279/attachments/original/1581442597/Welfare_Grants'_Eligibility_Criteria.pdf?1581442597):

AJA/UJS Welfare Grant: [admin@ujs.org.uk](mailto:admin@ujs.org.uk)

Finnart House School Trust: [info@finnart.org](mailto:info@finnart.org)

The Jewish Widows’ and Students’ Aid Trust: [alan@gapbooks.com](mailto:alan@gapbooks.com)

**Please note- you MUST send separate forms to each of the charities**

The completed form should be provided with the following supporting documentation:

1. Parents’/guardians’ confidential statement (see form)
2. Reference (at least one should refer to your financial situation)

a. **Academic:** Please include information that will help us understand the applicant’s situation, such as whether the applicant has the ability to successfully complete the proposed course, how it is relevant for the applicant’s future career, their attitude and performance at school/college etc. Please explain the extent to which the applicant will suffer severe financial hardship without further financial support (if applicable), whether they currently receive financial support (e.g. free school meals), and any other circumstances that might be relevant.

b. **Personal:**  This reference can be from anyone that knows the individual well- it could be a youth worker, social worker, Rabbi, teacher, employer or family friend. Where possible please put it on headed paper, with the individual’s title and address, so we can verify it if necessary. Please include any information that you think might help us understand the applicant’s situation, such as their family situation, why they might suffer financial hardship without further financial support and their aspirations for the future.

For more guidance on references, please click [here](https://d3n8a8pro7vhmx.cloudfront.net/ujs/pages/279/attachments/original/1581442596/Grants_Reference_Guidlines.pdf?1581442596).

**PARENTS’/GUARDIANS’ CONFIDENTIAL STATEMENT**

|  |  |  |
| --- | --- | --- |
| Name: |  |  |
| Relationship to Applicant: |  |  |
| Religion: |  |  |
| Date of birth: |  |  |
| Marital status: |  |  |
| In contact with/contributes to applicant? |  |  |
| Names and ages of other children: |  |  |
| Details of any illnesses/disabilities: |  |  |
| Occupation: |  |  |
| Annual income after tax and national insurance deductions (please provide a copy of your P45/60) |  |  |
| Savings: |  |  |
| Debts (e.g. mortgage): |  |  |
| Other relevant factors (e.g. in receipt of benefits): |  |  |

**Declaration**

I/we confirm that the information provided in this application form is accurate. I/we understand that the information in this form will be considered by the relevant charities. **I/we consent for these charities to process the information provided and note that they may share this information between themselves.** I/we understand that I/we may withdraw my/our consent to process the information provided at any time and, if I/we do so, the charities may be unable to continue providing charitable services to the applicant. I/we undertake to notify the charities of any material change to the information provided in this form.

|  |  |
| --- | --- |
| Signed by:  Print Name:  Date: | Signed by:  Print Name:  Date: |