

JOSEPH LEVY EDUCATION FUND

Application Form

Please read the Guidelines BEFORE completing this form.

**Please ensure that you complete all sections of the form and send us any additional item requested.
Bear in mind that we cannot assess incomplete applications.**

1) Have you applied to the Joseph Levy Education Fund before? Yes No

If yes, has your application/any of your applications been successful? Yes No

2) Your Details:

Title _____

First Name _____

Last Name _____

Address Line 1 _____

Address Line 2 _____

Address Line 3 _____

Town/City _____ Postcode _____

Area in UK: East Midlands East of England London Northern Ireland

North East England North West England Scotland South West England

South East England Wales West Midlands Yorkshire and the Humber

Mobile phone number _____

Email address _____

Date of Birth _____ / _____ / _____

3) Your Past Education:

Please tick the highest academic qualification you have achieved

- GCSE (or equivalent) A Levels (or equivalent) Certificate (eg HNC, CertHE or equivalent)
- Diploma (eg DipHE, HND or equivalent) Bachelors degree Masters degree
- Doctoral degree Other. Please, describe: _____
- None of the above

Details (course title and name of school/college/university)

Course Dates (eg 2010-2014) _____

4) Higher Education, Further Education or Vocational Training course you intend to follow:

Name of institution _____

Proposed course/qualification (Please tick one option):

- Certificate (eg HNC, CertHE or equivalent) Diploma (eg DipHE, HND or equivalent)
- Bachelors degree Masters degree Doctoral degree Vocational Training

Course Name: _____

What is the duration of the course? _____

Have you already been accepted? Yes No

If No, when do you find out if you have been accepted? Date: ____/____/____

What date does you course start? Date: ____/____/____

Please, briefly describe your long-term educational, or career or employment objectives and why you think this course will help you to fulfil them.

Additional item: Please enclose **brief details** from the course provider **of your proposed course of studies**.

5) Costs:

Course Costs:

Tuition fees £ _____ Enrolment fee £ _____

Examination fees £ _____ Books and materials £ _____

Other educational expenses £ _____

Living Costs:

Accommodation £ _____ per month

Travel £ _____ per month

Utility bills £ _____ per month

Other living expenses £ _____ per month

Total Living Costs £ _____ per month

6) Income:

Employment £ _____ per month

Will this change during your studies? Yes No

If Yes, how will it change? _____

Income support £ _____ per month

Disabled Students allowance £ _____ per month

Disability Living Allowance £ _____ per month

Any other monthly income/contribution towards your educational costs (eg family support) £ _____

Total Income £ _____ per month

7) Other sources of funding:

Student loan per year £ _____

Maintenance grant per year £ _____

Have you applied to any other institution for financial help? Yes No

If yes, please provide further details such as name of institution, amount requested and if your request was successful or is still being processed

8) Your request to the Joseph Levy Education Fund:

Please state amount of grant you are requesting £ _____

Please, briefly tell us what it would be used for

Please, briefly tell us what would be the impact on your educational plans if your application is not successful or if you receive a significantly smaller amount

9) Referees:

Name of Consultant or Cystic Fibrosis Team member: _____

Job Title: _____ Hospital or Cystic Fibrosis Centre: _____

Email address: _____ Phone number: _____

Name of academic referee (it could be from a previous course): _____

Job Title: _____ Institution: _____

Email address: _____ Phone number: _____

10) How did you hear about the Joseph Levy Education Fund?

We would like to send you an email twice a year to remind you about the deadlines to apply to the Education Fund. Do you agree?

I am happy to receive a reminder about the deadlines by email twice a year Yes No

We would like to send you an email once a year to request feedback on the way we operate. Do you agree?

I am happy to receive a request for feedback by email once a year Yes No

You do not have to answer Questions 11 and 12. We will not use this information to assess your application but it will help us to know if we are reaching everyone who might benefit from the Education Fund.

11) Your Gender: Female Male Other

12) Your Ethnicity:

White:

English/Welsh/Scottish/Northern Irish/British Irish Gypsy or Irish Traveller

Any other White background, please describe _____

Mixed /Multiple ethnic groups:

White and Black Caribbean White and Black African White and Asian

Any other Mixed/Multiple ethnic background, please describe _____

Asian/Asian British:

Indian Pakistani Bangladeshi Chinese

Any other Asian background, please describe _____

Black/African/Caribbean/Black British:

African Caribbean

Any other Black/African/Caribbean background, please describe _____

Other ethnic group:

Arab Any other ethnic group, please describe _____

13) Privacy and Data Protection, and Terms and Conditions of Grant:

By signing below I confirm that:

- **I have read and I understand the attached information about how my personal data will be used and I consent to the processing of my personal data for the purpose of managing this grant application.**
- **I have read and accept the attached Terms and Conditions of Grant.**
- **The information provided on this form is correct to the best of my knowledge.**

Signed: _____

Print name: _____

Date: _____

Privacy and Data Protection Notice:

- a. The Joseph Levy Education Fund is managed by the Joseph Levy Foundation (registered charity number 1165225) and is a partnership project between the Joseph Levy Foundation and the Cystic Fibrosis Trust (registered charity number 1079049). For the purposes of Data Protection regulations, the Joseph Levy Foundation is the Data Controller for the Education Fund. Any data, including personal data, relating to applications to the Joseph Levy Education Fund or grants awarded from the Joseph Levy Education Fund may be shared between the Joseph Levy Foundation and the Cystic Fibrosis Trust for the purpose of managing the Fund.
- b. The Joseph Levy Education Fund will hold and use personal information about you, the applicant, in order to process your application, to manage any grant that is awarded to you and to manage the overall operation of the Fund. We will not, without your consent, supply your name and address to any third party except where (1) such transfer is a necessary part of the activities that we undertake, or (2) we are required to do so by law. You have the right to obtain a copy of personal information held by us to correct any inaccuracies by notifying the Joseph Levy Education Fund in writing.
- c. The Joseph Levy Education Fund may verify your application by contacting the Consultant or Cystic Fibrosis Team member or the Academic referee shown on your application form.
- d. In certain circumstances it may be necessary for us to obtain a medical report about you. By signing this form, you confirm that you are in agreement for the Joseph Levy Education Fund to approach your Consultant for such a report.
- e. The Joseph Levy Education Fund will keep a copy of your application for 7 years to comply with legal regulations after which time we will destroy it.

Terms and Conditions of Grant: If you are awarded a grant:

- f. We will send you a grant offer letter. Once you confirm your acceptance of the grant offer we will send you the grant by cheque in the post.
- g. You must notify the Joseph Levy Education Fund when you receive the grant cheque.
- h. The grant can only be used for the purposes described in the grant offer letter. You must notify the Joseph Levy Education Fund as soon as possible of any change in your circumstances that might affect the use of the grant. Should your circumstances change we reserve the right to withdraw the grant offer.
- i. You must tell us if your contact details change during the period of our grant (eg address, email and telephone details).
- j. You must keep receipts for any items of equipment purchased with the grant and you must be able to provide copies of those receipts to the Joseph Levy Education Fund if we ask you to do so.
- k. You must provide a brief report to the Joseph Levy Education Fund on how the grant has supported your education or training.
- l. We may use information that you provide about the impact of the grant to promote the Education Fund to potential applicants or to raise additional money for the Education Fund . including through social media or any other promotional methods or materials. We will only use this information in ways that ensure you cannot be identified. If the Education Fund wishes to use this information in a way that would identify you . for example as one of the case studies on our website - we will only do so if you give us your consent in advance.
- m. The Joseph Levy Education Fund is a grant making programme and its responsibilities are limited to the provision of discretionary grants.