



Oakswood College

Empowering Through Education



Hardship Support Fund

Application Form

PROMOTING EXCELLENCE • ENSURING COMPLIANCE
SUPPORTING OUR COMMUNITY



GOVERNANCE



QUALITY



COMPLIANCE



EXCELLENCE

www.oakswoodcollege.co.uk



Hardship Support Fund Application Form

Academic Year:	
Application Reference (Office Use Only):	
Date Received:	

Important Guidance for Students

Please complete this form if you are experiencing **unexpected financial hardship that may affect your attendance, engagement, or continuation of study**. Please be advised that irrespective of the outcome of your application, the College may follow up with you in relation to any information disclosed in this application, as part of our duty of care.

Before applying, please ensure that:

- You are **fully enrolled and actively studying**
- You have explored other reasonable funding options
- You can provide supporting evidence
- The issue is urgent and short-term
- The request relates to essential study, living, safeguarding, health, housing, or emergency costs

The Hardship Support Fund is **discretionary, limited, and normally capped at a maximum amount of £500 per student per academic year**.

Please email the completed form and evidence to:

compliance@oakwoodgroup.co.uk

Please note:

If you have previously been granted an award from the College's Hardship Fund, this will not be taken into account in considering your application in terms of eligibility. However, if you are found eligible for an award and have previously been in receipt of an award, the amount and timing of your previous award will be taken into consideration by the College to ensure fairness. Receipt of an award previously is no guarantee or indication that a further award will be made, nor of any specific amount that may be awarded.



Hardship Support Fund Application Form

SECTION 1 – Student Details

Full Name:	
Student ID Number:	
Course / Programme:	
Year of Study:	
Campus / Study Location:	
Email Address:	
Telephone Number:	

Preferred Contact Method:

Email	<input type="checkbox"/>
Telephone	<input type="checkbox"/>
MS Teams	<input type="checkbox"/>
In-person meeting	<input type="checkbox"/>

SECTION 2 – Nature of Hardship

Please tick the main reason(s) for your application:

• Emergency housing costs/rent arrears	<input type="checkbox"/>
• Utility bills/risk of disconnection	<input type="checkbox"/>
• Essential study equipment replacement	<input type="checkbox"/>
• Emergency childcare costs	<input type="checkbox"/>
• Emergency medical or health-related costs	<input type="checkbox"/>
• Domestic crisis/safeguarding issue	<input type="checkbox"/>
• Delay in DSA or Student Finance payment	<input type="checkbox"/>
• Travel costs affecting attendance	<input type="checkbox"/>



• Other emergency financial hardship

If other, please specify:

SECTION 3 – Details of Your Circumstances

Please explain:

- what has happened
- when the hardship began
- why it is urgent
- how it is affecting your studies
- what steps you have already taken

SECTION 4 – Other Funding Explored

Please tell us what other options you have already explored:

Student Finance England	<input type="checkbox"/>
Disabled Students' Allowance (DSA)	<input type="checkbox"/>
Family / personal support	<input type="checkbox"/>
Employer support	<input type="checkbox"/>
Charitable grants	<input type="checkbox"/>
External hardship fund	<input type="checkbox"/>



Savings used	<input type="checkbox"/>
No other reasonable options are available	<input type="checkbox"/>
Provide details:	

SECTION 5 – Request for Support from Hardship Fund

Amount requested (£):	
What is the money needed for?	
When is the payment due by date? (If applicable)	

SECTION 6 – Supporting Evidence Checklist

Please tick all the evidence attached:

Recent bank statement(s)	<input type="checkbox"/>
Rent statement/tenancy agreement	<input type="checkbox"/>
Utility bill/arrears notice	<input type="checkbox"/>
Medical evidence	<input type="checkbox"/>
Childcare invoice/letter	<input type="checkbox"/>
Laptop repair/replacement quote	<input type="checkbox"/>
Travel cost evidence	<input type="checkbox"/>
Safeguarding/support letter	<input type="checkbox"/>
DSA / SFE delay correspondence	<input type="checkbox"/>
Other evidence (give details below)	<input type="checkbox"/>
Other evidence details:	

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SECTION 7 – Previous Hardship Support

Have you received hardship support from Oakwood College before?

Yes	<input type="checkbox"/>
No	<input type="checkbox"/>
If yes:	
Date of previous award:	
Amount awarded:	
Reason:	

SECTION 8 – Payment Preference

If approved, which support method is most appropriate?

Direct payment to me	<input type="checkbox"/>
Payment to landlord/utility provider	<input type="checkbox"/>
Purchase of essential equipment	<input type="checkbox"/>
Travel support	<input type="checkbox"/>
Voucher/subsidy arrangement	<input type="checkbox"/>
If third-party payment, provide details:	

SECTION 9 – Optional Support Meeting Request

Would you like to meet for a Student Support meeting to discuss your circumstances so that we can identify if there may be any other support we can put in place or any other needs you have?

Yes	<input type="checkbox"/>
No	<input type="checkbox"/>
Preferred format:	
In person	<input type="checkbox"/>
Online	<input type="checkbox"/>
Telephone	<input type="checkbox"/>

SECTION 10 – Student Declaration

Please tick to confirm:

I confirm that the information provided is true and accurate to the best of my knowledge.	<input type="checkbox"/>
I understand that providing false or misleading information may lead to refusal, recovery of funds, disciplinary action, and/or referral to external authorities.	<input type="checkbox"/>
I understand that this fund is discretionary and subject to available budget.	<input type="checkbox"/>
I consent to Oakswood College processing my personal data, including special category data where relevant, for the purpose of assessing this application in line with the Data Protection Policy and UK GDPR.	<input type="checkbox"/>
Student Signature:	
Date:	

FOR OFFICE USE ONLY

Initial Completeness Check

Complete	<input type="checkbox"/>
Incomplete – further evidence requested	<input type="checkbox"/>
Officer Name:	
Date:	



Assessment Outcome

Eligibility confirmed:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Risk to continuation:	<input type="checkbox"/> Low	<input type="checkbox"/> Medium	<input type="checkbox"/> High
Amount approved (£):			
Payment method approved:			
Conditions attached (if any):			

Decision:

Approved	<input type="checkbox"/>
Declined	<input type="checkbox"/>
Further evidence required	<input type="checkbox"/>
Referred to as an urgent safeguarding/welfare case	<input type="checkbox"/>
Decision Officer:	
Date:	

Senior Approval (if repeat / exceptional / above standard threshold)

CEO approval required	<input type="checkbox"/>
Senior-nominated officer approval	<input type="checkbox"/>
Name:	
Signature:	
Date:	

Privacy Notice:

Your data will be processed only for: hardship assessment, safeguarding, fraud prevention, governance oversight, audit, statutory reporting where required



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Data is handled in accordance with: UK GDPR, Data Protection Act 2018, Oakwood College Data Protection Policy, Records Retention Schedule