ALEXANDER W DAVIES CHARITABLE TRUST GRANT APPLICATION FORM

APPLICATION FOR COLLEGE/UNIVERSITY UNDERGRADUATE STUDENTS

Please complete and submit this form to lynne.burke@ledinghamchalmers.com

CRITERIA FOR APPLICANTS

To be eligible for consideration of a grant, the Applicant must fall under one or more of the following categories: -

- Category 1: The applicant was born in the Parish of Lumphanan or his/her parents were resident in Lumphanan at the time of the applicant's birth.
- **Category 2:** The applicant has lived in the Parish of Lumphanan for five years before the application and continues to live there.
- Category 3: The applicant was born in either the Parish of Torphins or Kincardine O'Neil, or the applicant's parents were resident within either of these Parishes at the time of the applicant's birth; or the applicant has lived within either of the Parishes for five years prior to making the application, and continues to live there.

Details of Student Full Name: ______ Home Address: Post Code: _____ Term Address: _____ Post Code: _____ Number of years at home address: _____ (current years' council tax form required to be provided alongside application) Date of Birth:

Please return all completed application forms to lynne.burke@ledinghamchalmers.com OR by post to Ledingham Chalmers LLP, Johnstone House, 52-54 Rose Street, Aberdeen, AB10 1HA, marked for the attention of Lynne Burke.

Place of Birth: _____

(birth certificate required to be provided alongside application)

Telephone Number:		
Email Address:		
<u>Details of Parent/Guardian</u>		
Title:		
Full Name:		
Current Address:		
Post Code:		
Address at time of Students birth:		
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Post Code:		
Telephone Number:		
reiephone Number.		
Finail Address.		
Email Address:		
Occupation/Former Occupation:	 	
Date of Birth:		

Place of Birth:
Have you ever previously applied to the Trust for any child?
YES / NO
If YES was your application successful?
YES / NO
Date of previous application:
Reason for previous application:
Names and ages of all dependent children:
How many of your dependent children are in full-time education?
What school(s) do your children attend and what fees (if any) are being paid?

<u>Course Details</u>
Name of College/University
Name of Course
Have you received an acceptance letter confirming your space on this course?
YES / NO
(If YES, please enclose a copy of acceptance letter alongside this application)
Duration of Course:
Year of Study (1 st , 2 nd , 3 rd , 4 th)
Final Qualification at the end of course
Course Fees and Funding
Course Fees for the year: £
Are course fees being paid for?
YES / NO
If yes, by whom
(please enclose award letter alongside this application)
Have you applied for a loan or bursary from SAAS?
YES / NO
If YES, please disclose the amount awarded: £
(If Yes, please also enclose award letter alongside this application)

If you have not applied for a loan/bursary from SAAS, please explain why:		
ave you applied for Educational Maintenance Allowance (EMA)?		
ES / NO		
f YES, please enclose award letter alongside this application)		
you have not applied EMA, please explain why:		
o you intend to work whilst studying?		
ES / NO		
lease disclose any other support being received from any other trust or organisation ncluding the amount being awarded): -		

If you have been refused a grant from SAAS or any such body, please provide a copy of the refusal letter alongside this application.

<u>Accommodation</u>
Will you be living at home or away from home during your studies?
HOME / AWAY
If you will be living away from home, please answer the following questions: -
Halls of residence or private accommodation?
Accommodation cost per month £
What is included in this cost (ie utility bills/food etc)
How many weeks is this accommodation to be paid for?
Accommodation cost per week £
(Please enclose proof of cost of accommodation – this can be provided in the form of an invoice)

Other Term-time Expenses

Food (cost per week)	
Utilities (cost per week)	
Student supplies (including books etc)	
Daily Travel	
Travel home from University	
Other Expenses (please specify)	
TOTAL PER WEEK	£
ESTIMATED TOTAL COST PER ACADEMIC YEAR	£

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Reason	tor	Ann	lication
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Please explain your in the trust will benefit			n award from

Financial Information of Parents/Guardians

Applicants are required to submit the previous years' p60 form and HMRC letter regarding any benefits for both parents (unless the child is from a single parent household) alongside this application form.

Gross Annual income of both parents

Salary	
Maintenance payments	
Child benefits	
Working tax credit	
Investment income	
Other (please specify)	
TOTAL PER MONTH	£

Monthly Expenditure of both Parents

Mortgage/rent	
Pension/life insurance premiums	
Loans	
Council Tax	
Utilities	
Food	
Other (please specify)	
TOTAL PER MONTH	£

Capital Assets

Asset	Value
House	
Investments	
Bank Accounts	
Building Society Accounts	
Other (please specify)	
TOTAL PER MONTH	£

Please declare all savings and investments

TOTAL	£

er income/expenditure where specified
previous years' p60 form and HMRC letter regardin de the application form.
£

<u>Declaration – Student</u>

, (student)
Certify that: -
(a) All of the information contained in all pages of this application is correct to the best of my knowledge.
(b) I shall inform the Trustees of any change in financial circumstances, or any permanent change of address occurring during the period of the grant.
(c) I undertake that if awarded a grant, the funds will be used solely for the purposes detailed in this application, and I shall refund any amount of the grant received in the event that the funds are no longer required. (e.g. cancellation of trip, or tutoring no longer required etc.)
Signature of student
Date of signing

<u>Declaration – Parent/Guardian</u>

I, (Parent/Guardian)
Certify that: -
(a) All of the information contained in all pages of this application is correct to the best of my knowledge.
(b) I shall inform the Trustees of any change in financial circumstances, or any permanent change of address occurring during the period of the grant.
(c) I undertake that if awarded a grant, the funds will be used solely for the purposes detailed in this application, and I shall refund any amount of the grant received in the event that the funds are no longer required. (e.g. cancellation of trip, or tutoring no longer required etc.)
Signature of Parent/Guardian
Date of signing

Checklist of Evidence Required

All requested evidence must be provided before the Trustees will review an application.

Before submitting this application to Ledingham Chalmers LLP, please ensure that you have included the following evidence: -

- o Proof of household income in the form of a P60 for ALL parents in the household.
- o Proof of income in the form of a P60 for student.
- o Proof of any EMA, loan or bursary (award letters required).
- o Students birth certificate.
- o Documentation relative to any grants being received from other sources.
- o Current years council tax form (parents).
- Passport/photograph ID for both the parent/guardian and the student.
- o Proof of enrolment at college or university.
- o Bank details for the receiving account of any potential payments. This should be provided as a bank statement and in pdf form.
- o The last three months' bank statements for every bank account held.
- Families receiving income from self-employment must provide the Trustees with a copy of their business audited accounts for the latest 3 years.

Please confirm that: -
The application has been fully completed and signed
YES / NO
If no, please explain why:
All required evidence has been provided in support of this application
YES / NO
If no, please explain why:

The Trustees would be grateful if you could take a minute to answer the following question.