

# THE SNOWDON AWARD SCHEME

Helping students with physical disabilities  
in further and higher education or training

## Application Form

### IMPORTANT

**BEFORE** completing this form please read form SA2 (Conditions).

**PLEASE WRITE CLEARLY.** It is essential that your answers are clear and that you provide full information. If necessary you may ask someone else to write or type for you. If you run out of space please add a loose sheet.

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1. FULL NAME: Mr/Mrs/Miss/Ms

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2. POSTAL ADDRESS

Telephone number:

Mobile:

Email:

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3. AGE

NATIONALITY

DATE OF BIRTH

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### **NOTE: CLOSING DATE FOR APPLICATIONS IS 31<sup>ST</sup> MAY**

Applications received by this date will be considered at our July panel meeting.

Later applications (received by 31<sup>st</sup> August) may be considered at our October meeting only if sufficient funds are available.

The Snowdon Award Scheme  
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Southwater  
Horsham  
West Sussex  
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Tel: (01403) 732899

E-mail: [info@snowdonawardscheme.org.uk](mailto:info@snowdonawardscheme.org.uk)

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Reg. charity no. 282754

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### 4. ADDITIONAL CONTACT (In case you are unavailable)

Name:

Telephone number:

Address:

Mobile:

Email

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### 5. DISABILITY Give **full** information about your disability. A medical letter confirming this information **must** be provided (see question 14). Information given will be completely confidential.

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### 6. COURSE/STUDY TO BE UNDERTAKEN Give **full details** of course.

a) Name of college/university:

b) Title of course/training:

c) Start date:

d) Expected finish date:

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### 7. WHAT FUNDS ARE YOU APPLYING TO THE SNOWDON AWARD SCHEME FOR?

**Please note: The Scheme is unlikely to meet standard costs that all students have to bear.**

**A Snowdon Award will not usually exceed £2,000 per year.**

**You can apply here for one year of funding.**

Please give full details below including accurate costs.

Equipment (attach details where available):

£

Other disability-related expenses: eg interpreter, notetaker, travel, etc  
(attach breakdown of costs where applicable):

£

**TOTAL**

£
£
_____

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8. **PERSONAL STATEMENT** Please provide a personal statement explaining how your studies are impacted by your disability and why an award for the things you have outlined above will make a difference. (Use a separate piece of paper if necessary.)

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9. **OTHER APPLICATIONS FOR NON-STATUTORY FUNDING** Please ensure form SA3 has been completed and enclosed with this application. List here all other applications for grants or other financial assistance from other non-statutory sources (trusts and charities etc) you have made or intend to make and what they will be used for.

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### 10. SKILL: NATIONAL BUREAU FOR STUDENTS WITH DISABILITIES

Have you asked for their advice? Yes/ No

Please note: SKILL provides a free information and advice service for disabled students . We recommend you check out their website at [www.Skill.org.uk](http://www.Skill.org.uk) . Their contact numbers are (telephone) 0800 328 5050 (textphone) 0800 068 2422 and they can be e-mailed at [Info@Skill.org.uk](mailto:Info@Skill.org.uk)

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11. **PREVIOUS SNOWDON AWARD** Please provide dates and details of any awards that you or a member of your family has received from us.

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12. **EDUCATION** Give dates and details of schools, colleges or universities attended and of any recognised examinations taken and passed.

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13. EMPLOYMENT Give name/address of any employer(s), dates and nature of work.

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14. YOUR FUTURE What are your future objectives after you have successfully completed this course of study?

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## 15. SUPPORTING INFORMATION

**The following supporting information must be provided to complete your application:**

- |  | <b>Enclosed/to follow</b> |                          |
|--|---------------------------|--------------------------|
| a) Medical confirmation of your disability from your doctor or consultant  | <input type="checkbox"/>  | <input type="checkbox"/> |
| b) Personal reference (from someone who has known you for at least 3 years and who is not related to you)  | <input type="checkbox"/>  | <input type="checkbox"/> |
| c) Academic reference from previous or current place of study  | <input type="checkbox"/>  | <input type="checkbox"/> |
| d) Official confirmation of the study place for which you are applying   | <input type="checkbox"/>  | <input type="checkbox"/> |
| e) Evidence of costs from suppliers of equipment/human support etc   | <input type="checkbox"/>  | <input type="checkbox"/> |
| f) If you are asking for help towards dyslexia related study costs, a copy of an Educational Psychologist's assessment written within the last three years | <input type="checkbox"/>  | <input type="checkbox"/> |

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16. ADDITIONAL INFORMATION Please now give any additional information you feel may be helpful to support this application. Include a covering letter if necessary.

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THE SNOWDON AWARD SCHEME reserves the right to make such enquiries as are thought to be necessary concerning any application and may attach certain conditions to an Award.

**DECLARATION BY APPLICANT** I understand the terms under which awards are made. I agree to abide by them and agree to notify you of any significant changes in particulars given here that occur during the application procedure or during the administration of any grant awarded.

Application submitted by applicant (tick box)

Date...../...../.....

Application made on behalf of applicant by (name) .....

# THE SNOWDON AWARD SCHEME

SA3

This form **must** be completed **in addition** to application form SA1. It requests information from you regarding various sources of funding that might be available.

Please complete **sections A and B** plus **ONE** other section.

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## A. GENERAL (must be completed)

How did you first hear about The Snowdon Award Scheme?.....

Have you applied to your social services/social work department for support funding, eg through an assessment of your non-educational personal care needs? **Yes/No**

**Outcome/details:**.....

If your course is eligible for a Career Development Loan or other bank loan, have you applied? **Yes/No**

**Outcome/details:**.....

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## B. WELFARE BENEFITS (must be completed)

Do you receive any of the following:

Disability Living Allowance -		Incapacity Benefit	<b>Yes/No</b>
Care (lower/middle/higher rate)	<b>Yes/No</b>	Income Support	<b>Yes/No</b>
Mobility (lower/higher rate)	<b>Yes/No</b>	Housing Benefit	<b>Yes/No</b>
Severe Disablement Allowance	<b>Yes/No</b>	Council Tax Benefit	<b>Yes/No</b>

**Please COMPLETE ONLY ONE of sections C to G below depending on your level of study**

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## C. FURTHER EDUCATION

Have you applied to your college to have your fees waived or reduced? **Yes/No**

**Outcome/details:**.....

Have you contacted your college for support through the college's additional support funding for disabled learners? **Yes/No**

**Outcome/details:**.....

Have you applied to your college's Learner Support Fund\*? **Yes/No**

**Outcome/details:**.....

\*Financial Contingency Fund (Wales) or Access/Hardship Fund (Scotland)

Have you applied to your awarding authority/college for help with travel costs? **Yes/No**

**Outcome/details:**.....

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## D. SPECIALIST FURTHER EDUCATION

Have you applied to the YPLA\* for funding for your placement?

**Yes/No**

**Outcome/details:**.....

Have you applied to your social services/social work department for support of your placement? **Yes/No**

**Outcome/details:**.....

\* Welsh Assembly (ELWa) or Scottish Funding Council

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**E. UNDERGRADUATE HIGHER EDUCATION**

Have you applied for:

Tuition-fee student loan? **Yes/No**

**Outcome/details:**.....

Student loan (for living costs)? **Yes/No**

**Outcome/details:**.....

University bursary? **Yes/No**

**Outcome/details:**.....

Disabled Students' Allowances (DSA)? **Yes/No**

**Outcome/details:**.....

If yes, have you had (or are about to have) an assessment of your needs at an Access Centre? **Yes/No**

**If yes, please provide a copy of the completed DSA assessment as soon as it is available.**

Have you applied to your institution's Access to Learning/Hardship Fund for a grant/loan?

**Yes/No**

**Outcome/details:**.....

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**F. POSTGRADUATE STUDY**

Have you applied for Disabled Students' Allowances (DSA)? **Yes/No**

**Outcome/details:**.....

If yes, have you had (or are about to have) an assessment of your needs at an Access Centre? **Yes/No**

**If yes, please provide a copy of the completed postgraduate DSA assessment as soon as it is available.**

If your course attracts research council funding have you applied? (NB There is likely to be a disability component to any such funding) **Yes/No**

**Outcome/details:** .....

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**G. WORK-BASED LEARNING/TRAINING OR JOBCENTRE PLUS SCHEMES**

Have you applied to your training provider for the support you need? **Yes/No**

**Outcome/details:**.....

Have you applied to the Jobcentre for disability-related funding for your training? **Yes/No**

**Outcome/details:**.....