

Notification of change of circumstances for students on full-time courses - Academic Year 2009/10

Form CO1

This form is also available on our website www.studentfinanceneni.co.uk

Student's forename(s): Student's surname:

Tick the boxes below to indicate your change of circumstances and complete the relevant sections of this form.


My change of circumstance

Sections to be completed

- | | |
|--|---|
| <input type="checkbox"/> I have changed my name. | 1 and 2 |
| <input type="checkbox"/> I have changed my address. | 1 and 3 |
| <input type="checkbox"/> I have changed my university or college. | 1, 4, 5 and 6 |
| <input type="checkbox"/> My course tuition fee amount has changed. | 1 and 6 |
| <input type="checkbox"/> I have changed my course. | 1, 5 and 6 |
| <input type="checkbox"/> I have left my course or suspended my studies. | 1 and 7 |
| <input type="checkbox"/> I am changing to a part-time course. | 1 and 5 |
| <input type="checkbox"/> I have other changes of circumstance not detailed on this form. | 1 and please attach piece of paper detailing change |

 **Please remember to sign and date the declaration on page 8**

Important information

- To change your bank details or request a different amount of loan, please contact our Customer Support Office on **0845 600 0662**.
- You should complete this form to notify us immediately of any change in your circumstances at any time. We will use the information you provide to determine if a change of circumstance affects the amount of student finance you are entitled to receive.
- Whenever you see this icon  you must provide evidence to support your change of circumstances. For any university or college and course related change of circumstances, you may also need to ask your university or college to send evidence.

section

1

personal details

Personal details

Customer Reference Number:

Title:

Forename(s):

Surname:

Date of birth:

DAY	MONTH	YEAR
<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

section

2

change of name

Change of name/title

New title:

New forename(s):

New surname or family name:



Please provide appropriate documentary evidence, e.g. marriage certificate, deed poll, etc.

change of address and/or telephone number

Contact details

New home address

Postcode:

New home phone number:

Date your home address will change:

DAY	MONTH	YEAR
<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

New term-time address

Postcode:

New term-time phone number:

Date your term-time address will change:

DAY	MONTH	YEAR
<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

change of university or college

University/college details

University/college name and address

Postcode:

UCAS university/college code (if you know it)

Did the change take place after starting a previous course?

Yes No



If 'Yes', you must ask your new university or college to confirm the change to us, as soon as possible.

Section 5 must also be completed to confirm the course that you will be studying at your new university or college.

5

change of course

Course details

a1

Course Name:

If you are following a combined studies or modular course, please list all the subjects being studied

a2

If the course is franchised to another university/college, give the address of the other university/college

 Postcode:

a3

Did the change of course take place after you started your previous course?

Yes No

a4

Qualification you expect to gain (e.g. BSc Physics)

a5

UCAS course code (if you know it):

a6

UCAS campus code (if you know it):

a7

Date you will start your new course (month and year):

a8

Date you will finish your new course (month and year):

a9

Course length (years):

change of course

b1

Year of course:

- Foundation year
 First year
 Second year
 Third year
 Fourth year
 Other (give details)

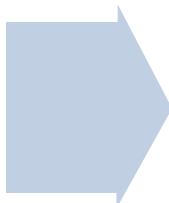
b2

Which of the following is your new course? Tick one box only

Full time undergraduate

Initial Teacher Training (ITT) courses

- Flexible postgraduate ITT
 Part-time undergraduate ITT
 Part-time ITT (excluding first degrees)
 Full-time postgraduate ITT



Number of weeks you will be studying full-time in academic year 2009/10.

Number of weeks you will be on full-time teaching practice in academic year 2009/10.

You must provide a letter from your university or college confirming the number of weeks you will be on full-time study and full-time teaching practice during academic year 2009/10.

Other course types

- Full-time distance learning
 Full-time foundation degree
 Full-time involving a placement (sandwich course)



Do you have a disability which prevents you from attending your university/college in person? Yes No

You must provide evidence that clearly shows you are unable to attend university or college in person for a reason which relates to your disability.

c1

Where will you live during the academic year 2009/10?

- | | | |
|--------|---|--|
| Term 1 | Living with parent <input type="checkbox"/> | Elsewhere or own home <input type="checkbox"/> |
| Term 2 | Living with parent <input type="checkbox"/> | Elsewhere or own home <input type="checkbox"/> |
| Term 3 | Living with parent <input type="checkbox"/> | Elsewhere or own home <input type="checkbox"/> |

c2

Where will you spend most of your time studying in the academic year 2009/10?

- | | | | |
|--------|--|---------------------------------------|--|
| Term 1 | University or college <input type="checkbox"/> | Study abroad <input type="checkbox"/> | Placement in the UK or abroad <input type="checkbox"/> |
| Term 2 | University or college <input type="checkbox"/> | Study abroad <input type="checkbox"/> | Placement in the UK or abroad <input type="checkbox"/> |
| Term 3 | University or college <input type="checkbox"/> | Study abroad <input type="checkbox"/> | Placement in the UK or abroad <input type="checkbox"/> |

If you have ticked 'University or college' and/or 'Study abroad' for all 3 terms go to h

d1 Where will your placement be?

Abroad UK/ROI Don't know

If you 'Don't know' go to e2

d2 If your placement is abroad, have you been accepted onto the ERASMUS exchange scheme?

Yes No

e1 Placement name and address, if known:

 Postcode:

e2 Is the placement:

paid unpaid

If you ticked 'unpaid' please indicate which type:

- a hospital, a Public Health Service Laboratory or a Primary Care Trust;
- a Health Authority, Strategic Health Authority, Local Health Board, Special Health Authority, Health Board, Special Health Board or a Health and Social Services Board;
- a Local Authority carrying out its duties relating to health, welfare or caring for children and young people, or a voluntary organisation providing facilities or carrying out similar activities;
- the prison or probation sector or after-care services;
- a research institute; or
- an unpaid placement that is not listed above.

f Do you have to attend a place in the UK/ROI away from your main college as part of your medical or dental clinical training in the academic year 2009/10?

Yes No

g Have you been awarded a state-funded place on a dance and drama course at a privately-funded institution?

Yes No

e If 'Yes', please send us the official letter offering you the place.

change of course tuition fee

Give the full tuition fee amount that your university or college is charging for the course you will be studying in academic year 2009/10:

£

If you wish to apply for a Tuition Fee Loan or wish to change the amount of Tuition Fee Loan you originally requested, you must complete a Tuition Fee Loan Request Form. You can download this form at www.studentfinancenl.co.uk. Alternatively, contact our Customer Support Office on **0845 600 0662** to have one sent to you.

leaving your course or suspending your study

Leaving/suspending study

a1 Did you begin your course? Yes No

If "No", you should not complete any more of this form. Please sign and date the declaration on page 8.

a2 When did you leave or suspend study? DAY MONTH YEAR

a3 Have you told your university or college that you have left your course? Yes No

a4 Do you plan to return to higher education? Yes No **If 'No' go to c**

a5 When do you plan to return? DAY MONTH YEAR

a6 Do you plan to return to: the same course a different course

Please ensure that you have completed Section 5 with details of your new course.

Repeating study

b Will you be repeating any period of study? Yes No

If 'Yes', what period will be repeated?

c Please give the reason for leaving your course or suspending your study.

e Please ensure that your college or university are made aware of the above change of circumstance.

Declaration

Our Data Protection Statement sets out who will use the information provided on this form and what they will use it for. Before signing this form please read our statement online at www.studentfinancenl.co.uk/dataprotection. Alternatively, you can request a copy by writing to the Student Loans Company (SLC) at 100 Bothwell Street, Glasgow or by calling our Customer Support Office on 0845 600 0662.

If you cannot sign this form it must be signed on your behalf by your Power of Attorney. The Power of Attorney letter must be sent with this form before a signature from that Power of Attorney will be accepted.

- I confirm that to the best of my knowledge and belief, the information I have given on this form is true and complete and I understand that if I have given my Education and Library Board (ELB) false information, or have not given them complete information, I might be refused financial support, or I may be prosecuted and my financial support withdrawn.
- I agree to give my ELB any additional information they require to enable them to process my application and agree to tell them immediately if my circumstances change in any way that might affect my entitlement to financial support.
- I understand that if I do not tell my ELB about any change in my circumstances, which may affect my entitlement, I may not be eligible to receive any outstanding instalments or payments that they have told me about, and that I may have to repay all or part of the financial support I have already received in the year.
- I agree in the event of receiving an overpayment of financial support. I am obligated to repay any of this overpayment in full.

Your full name

(in BLOCK CAPITALS):

Your signature:

Date:

Once you have completed this form, and signed and dated the declaration, please return it to us at the ELB address shown on the Education and Library Board finder available online at www.studentfinancenl.co.uk.