Dumfries & Galloway COUNCIL

Dumfries and Galloway Council
Pupil/Parent Support Unit
Woodbank
30 Edinburgh Road
Dumfries
DG1 1NW

EDUCATION MAINTENANCE ALLOWANCE (EMA)

SESSION 2012/13

COMPLETE FORM IN BLACK OR BLUE INK

FULL NAME OF STUDENT
LEARNING CENTRE
DATE OF BIRTH

Have you received an EMA before? ☐ YES ☐ NO

A fresh application must be made each academic year including all documentation needed to complete the assessment.

OFFICIAL USE ONLY

EMA Reference No.	**Date Application Received**	**1st Check**	**2nd Check**
Total Household Income £	**Single Student Rule** ☐	**EMA Start Date**	**Date Award Letter Sent**
	Multiple Student Rule ☐		
Date Learning Agreement Input	**Autumn Intake** ☐	**Provisional Award**	**Date Refused**
	Winter Intake ☐		

FOR OFFICIAL NOTES

Education Maintenance Allowances (EMA)
Additional Guidance

- If you were born between 1 March 1993 and 28 February 1997 you may be eligible for an EMA.
- If you are 16 years of age or over before 30 September 2012, you may be eligible for an EMA from the beginning of term.
- If you are 16 years of age between 1 October 2012 and 28 February 2013, you may be eligible for an EMA from January 2013.
- For those eligible for full year award, if the application is not submitted by 30 September 2012, the award can only be made from the week it is received by this office.
- For those who are eligible from January 2013, if the application is not submitted by 28 February 2013, the award can only be made from the week it is received by this office.
- The cut-off date for processing application forms for academic year 2012/13 is 31 March 2013. No applications will be processed after this date.
- Household income is assessed on gross taxable household income for the period April 2011 to March 2012.
- The income thresholds for the EMA Programme, Academic Year 2012/13 are as follows:

Income	No. of dependant children in the household	Award
£0 - £20,351	1	£30
£0 - £22,403	2+	£30

- Dependent children are all those up to the age of 16 and those over the age of 16 and up to the age 25 if they are in full time further or higher education.
- If you are receiving education while living in a foster home or children's home, and are in the care of the local authority you are eligible for a £30 EMA award without having to provide evidence of household income.
- If successful, you must complete a learning agreement and adhere to the terms of that agreement.
- If successful, you must attend school for a minimum of 21 guided learning hours per week (timetabled hours including study periods). For students living in Dumfries and Galloway but studying across the border the guided learning hours may differ.
- If successful, you will only receive EMA payments for those weeks where you have maintained 100% attendance (including authorised absences) and acceptable punctuality and conduct.
- Students should apply/reapply each academic year.

Please refer to the checklist on page 11 prior to submitting your form.

Please complete the application form and send it to the following address:

Education Maintenance Allowances (EMA)
Application Contact Address

Dumfries and Galloway Council
Pupil/Parent Support Unit
Woodbank
30 Edinburgh Road
Dumfries
DG1 1NW
Tel: 01387 260493 ext 64493
Fax: 01387 260453

DATA PROTECTION ACT

The Council is under obligation to manage public funds properly. Accordingly, the information that you provide will be used to ensure all sums due to the Council are paid timeously, e.g. by identifying persons who are non payers of council tax and to improve the uptake of benefits.

The information may also be used to prevent and detect fraud. It is also possible that this information may be shared for the same purposes with public bodies, including neighbouring councils or other organisations which handle public funds.

- Education Maintenance Allowance (EMA) is a programme funded by the Scottish Government and administered to Local Authority Education Departments for schools throughout Scotland. The Scottish Government and Local Authorities are controllers in relation to your information.
- The information you supply shall be used for the purposes of assessment, award, payment, and where necessary, recovery of the EMA and we will provide information to the Scottish Government, all in accordance with the requirements in the Scottish Government EMA (Scotland) Business Model.
- We may check information provided by you, or information about you provided by a third party, with other information held by us. We may also get information about you from certain third parties, or give information to them, to check the accuracy of information, to prevent or detect crime, or to protect public funds in other ways, for research or statistical purposes, as permitted by law. These third parties include other government departments.
- We will not disclose information about you to anyone outside our Local Authority unless the law permits us to.

Part A

Section 1(A): PERSONAL DETAILS – Completed by Student

Gender Male ☐ Female ☐ Date of Birth (Day/Month/Year) ☐☐ ☐☐ 1 9 Y Y

First Name(s)

Surname(s)

Email address of applicant

Current Home Address

Postcode

Home Telephone Mobile

Section 1(B): PERSONAL NATIONALITY AND RESIDENCY DETAILS

How long have you lived in the United Kingdom? From D D M M Y Y Y Y

Have you lived at your present address for longer than 3 years? Yes ☐ No ☐

If no, please tell us your previous address(es) within the last 3 years, including those abroad.

From D D M M Y Y Y Y To D D M M Y Y Y Y

Address 1

Postcode

From D D M M Y Y Y Y To D D M M Y Y Y Y

Address 2

Postcode

Residency: please tick the relevant box:

UK ☐ EU/EEA National/Swiss National ☐ Settled Status/Exceptional Leave to Enter/Remain ☐

Refugee Status/Temporary Protection/Humanitarian Protection ☐ None of these ☐

From D D M M Y Y Y Y To D D M M Y Y Y Y

If required, please use the additional information page at the end of the application form.

Section 2: COURSE/LEARNING CENTRE DETAILS – Completed by Student

Name of School

Address

Postcode

Are you attending school and/or college for at least 21 guided learning hours each week? Yes ☐ No ☐

If no, how many guided hours will you be attending each week? ☐

Do you have flexible study arrangements to meet your particular needs, i.e. due to a medical condition?

Yes ☐ No ☐

Please state reason why you will be attending for less than 21 guided learning hours. Please use additional information page if required.

Which year of study will you be undertaking? S4 ☐ S5 ☐ S6 ☐ Other ☐

If you received an EMA award last year, to which Local Authority did you apply, and where did you attend?

Section 3: BANK/BUILDING SOCIETY ACCOUNT DETAILS – Completed by Student

Name of person holding account

Is the account holder the EMA student? Yes ☐ No ☐

If no, please state reason on additional information page.

Name and Address of your Bank/ Building Society

Bank/Building Society Sort Code (6 digits)

Account Number (8 digits)

Roll/Reference Number (if applicable)

Any changes to your bank/building society account must be made in writing immediately to your Local Authority Education Department

Section 4: INDEPENDENT STATUS – Completed by Student

Do you receive Income Support or income-based Employment and Support Allowance in your own right? Yes ☐ No ☐

If yes, are you living under the care of the Local Authority or with foster parents? Yes ☐ No ☐

Section 5: FAMILY DETAILS – Completed by Student

Who do you live with? (please tick all that apply)

Mother ☐ Father ☐ Mother's partner ☐ Father's partner ☐ EMA Applicant's partner ☐

Grandparent(s) ☐ Foster parent(s) ☐ In care ☐ On my own ☐

Other adults ☐ please specify _____

Lone parent household? Yes ☐ No ☐ **If yes, please provide proof**

How many dependent children living in the household? ☐

(Full) Name of Other Dependents	Date of birth	Nursery/School/Learning Centre

	Parent/Carer 1	Parent/Carer 2
Name (include title)		
Permanent Address		
Postcode		
Relationship to Applicant		
Occupation(s) held during tax year 2011/12		
Marital Status		
Contact Number		

EMA applicants must now sign the Student Declaration at Section 7(A) on page 10.

Section 6(A): HOUSEHOLD INCOME – Completed by Parent(s)/Carer(s)

Have you included a relevant complete (ie pages 1, 2, 3 and 4) Tax Credit Award Notice (TCAN) TC602 for 2012/13 with your application form?

Yes ☐ No ☐

If yes, please go to Section 7(B)

Please note we are unable to accept provisional or annual review forms

Section 6(B): HOUSEHOLD INCOME – Completed by Parent(s)/Carer(s)

For those where there is no TCAN available, the following income details are required.

Please enter nil value if not applicable. Values should be annual amounts for 2011/12.

TAXABLE SOCIAL SECURITY BENEFITS – AMOUNT RECEIVED IN 2011/12.

	Parent/Carer 1	Parent/Carer 2
Carer's Allowance *(previously called Invalid Care Allowance)* *Including* any child dependency increase.	£	£
Contributions-based Jobseeker's Allowance ***Do not include*** any amounts of income-based Jobseeker's Allowance. If you started work and gave your employer a P45U showing these details, do not include them here.	£	£
Contributions-based Employment and Support Allowance Please state any Contributions-based Employment and Support Allowance received.	£	£
Incapacity Benefit *Include* benefit paid after the first 28 weeks of incapacity (at the short-term higher and long-term rates) together with any child dependency increase. If any tax was deducted from your benefit, enter the amount due before the tax was taken off. ***Do not include*** benefit paid in the first 28 weeks of incapacity (at the short term lower rate) or benefit paid for a period of incapacity that began before 13 April 1995 and for which Invalidity Benefit used to be payable or any child dependency increase with these payments. If you started work and gave your employer a P45U showing these details, do not include them here.	£	£
Income Support This is only taxable if it is payable to a member of a couple and the recipient (but not the recipient's partner) is on strike. ***Do not report*** Income Support if it is not taxable.	£	£

SOCIAL SECURITY BENEFITS

Are you in receipt of non-taxable social security benefits? Yes ☐ No ☐

If yes, please take part C to DWP to be completed.

EARNINGS FROM EMPLOYMENT (INCLUDING SELF EMPLOYMENT) IN 2011/12

	Parent/Carer 1	Parent/Carer 2
Total gross employment income from all jobs after deduction of • pension contributions, and • Deductions to charity via gift aid **But,** before taking off • tax and National Insurance contributions, and • Share Incentive Plan deductions **Include**: • your total profits minus losses from self-employment • any tips or gratuities you receive • any Statutory Sick Pay you received • the taxable part of any termination payments • taxable securities options gains • any strike pay you received • payments for any work done whilst you were serving a sentence in prison or on remand (this counts as income for tax credit purposes even though it is not taxable as earnings)	£	£
Deduct any allowable expenses you have incurred	£	£
Deduct up to the first £100 for each week (for example, if you received £80 please enter 0, if you received £120 please enter £20) you received Statutory Maternity Pay, Statutory Paternity Pay and Statutory Adoption Pay (for tax credits, £100 a week of each payment is ignored)	£	£

BENEFITS FROM YOUR EMPLOYER(S) IN 2011/2012

Type of benefit	Parent/Carer 1	Parent/Carer 2
Goods or assets	£	£
Your liabilities (bills, etc.) paid by employer	£	£
Vouchers and credit tokens	£	£
Car mileage allowances or running costs	£	£
Company cars	£	£
Car fuel	£	£
Taxable expenses payments	£	£

NOTIONAL INCOME

	Parent/Carer 1	Parent/Carer 2
Capital treated as income (e.g. stock dividend).	£	£
Trust income that under the income tax rules is treated as the income of another person, e.g. investment income of a minor child where trust funds have been provided by a parent and the amount exceeds £100.	£	£
Income you were entitled to but did not apply for, e.g. if you were entitled to claim Carer's Allowance but did not claim it.	£	£
Income you deprived yourself of, e.g. if you sell the right to an occupational pension worth £10 a week for £2500, the £2500 should not be included but you should add £10 a week to your income.	£	£
Income you have deprived yourself of (e.g. income not taken because you worked for less than the going rate (or for nothing) but where the person for whom the work was done, or for whom the service was provided, has the means to pay. This does not apply to voluntary work or employment or training programmes.	£	£

UK PENSION

	Parent/Carer 1	Parent/Carer 2
Widowed Parents Allowance.	£	£
State Pension.	£	£
Other Pensions, Personal pension plan or retirement annuity contracts.	£	£

SAVINGS

	Parent/Carer 1	Parent/Carer 2
Gross income from investments/savings/shares, etc. include interest from any bank or building society accounts (this is income before tax was deducted).	£	£
If you received any company dividends add the tax credit to the dividend.	£	£

PROPERTY/TRUST/FOREIGN INCOME

	Parent/Carer 1	Parent/Carer 2
Include income from property or land in the UK that you owned or leased out (if this was part of your business income include it above at income from self-employment).	£	£
Gross income from a trust, settlement or a deceased person's estate (this is the income before tax was deducted).	£	£
Foreign Income: Include the gross amount, in British pounds before any foreign tax is deducted. NB – for foreign pensions only include 90% of the gross amount received.	£	£

Add totals for Parent/Carer 1 and Parent/Carer 2	£

FOR OFFICE USE ONLY

Please note deduction from other income where appropriate.	£

OVERALL TOTAL PER ANNUM	£	£

Section 7(A): STUDENT DECLARATION

This section must be completed by the student applying for an EMA award.

- I declare that all the answers given in this form are true.
- I have read the guidance and understand and accept my obligations.
- I understand that if I give false information or withhold information my EMA application will be cancelled and, if necessary, action will be taken to recover any money paid to me.
- I undertake to refund any sum arising from an overpayment for any reason.
- I understand that if I do not keep to the conditions of my Learning Agreement, payments may be withheld.
- I understand that if I leave school, I will not be eligible for any further payments.
- I understand that relevant information may be passed on to third parties within the Local Authority.
- I give permission for the local authority to release information relating to my independent status to EMA Unit.

Signature of Applicant _____ Date D D M M Y Y Y Y

Name (PRINT) _____

If the student is unable to sign this form due to additional support needs, please leave blank and tick box provided. ☐

Section 7(B): PARENTAL/PARTNER/CARER DECLARATION

This section must be completed if the applicant is under 18 years of age or the award has been assessed against the income of the applicant's parent, spouse, or carer.

- I/We declare that to the best of my/our knowledge and belief all the information given, in connection with this application, is full and correct in every respect.
- I/We undertake to provide any additional information which may be required by the Local Authority to verify the particulars given and also to inform the Local Authority immediately of any alteration in these particulars.
- I/We undertake to inform the Local Authority of any changes in financial circumstances which may affect the award.
- I/We understand that if my/our child does not keep to the conditions of their Learning Agreement, payments may be withheld.
- I/We understand that if my/our child leaves school, he/she will not be entitled to any further payments.
- I/We consent to the undertaking signed by the student above.
- I am/We are aware that my/our child is bound by the conditions set out by the EMA guidance.
- I/We give permission for the Local Authority to release information relating to my/our household circumstances to EMA Unit for proof of single occupancy.

Parent/Carer 1
Signed _____ Date D D M M Y Y Y Y

Name (PRINT) _____

Parent/Carer 2
Signed _____ Date D D M M Y Y Y Y

Name (PRINT) _____

Please use the Checklist on page 11 to ensure all relevant documentation has been provided.

Section 8: CHECKLIST

Please ensure the following documents are submitted with your application form.

Failure to send in the relevant documents will delay the processing of your EMA.

A first class stamp may not be sufficient postage for returning this application form. Please check postage required.

Documentation required (see below)	Tick if enclosed	For office use only
Have you enclosed a stamped addressed envelope (9" x 6" in size) for personal documents to be returned? A first class stamp may not be sufficient postage	☐	☐
If you are an independent student, Part C should be completed by the Department for Work and Pensions (DWP)	☐	☐
HM Revenue & Customs Tax Credit Award Notice (TCAN)TC602 for 2012/13	☐	☐
2012 P60	☐	☐
Valid week 52/month 12 payslip	☐	☐
SAAS or college award letter	☐	☐
School/college/university letter confirming enrolment	☐	☐
Statement of earnings from HM Revenue & Customs if parent(s)/carers(s) are employed	☐	☐
If parent(s)/carer(s) are self employed and are not in receipt of a (TCAN)TC602, SA302 or accountant's certificate (see Part B) should be submitted	☐	☐
If parent(s)/carer(s) receive benefits – Part C must be completed by Department for Work and Pensions (DWP) or a P60U or confirmation letter must be included	☐	☐
2012 P60 supporting parent(s)/carer(s) occupational pension	☐	☐
Proof of guardianship, if required, e.g. child benefit letter	☐	☐
Proof of lone parent status, e.g. council tax notice for period April 2011-March 2012	☐	☐
Proof that you are in the care of the Local Authority, if applicable	☐	☐
P45 if necessary	☐	☐
Other documents you may have supplied, please specify on Additional Information page 12	☐	☐
Other documentation required as per Section 6B Household Income calculation	☐	☐
Any documentation to support other dependent children	☐	☐

RETURN OF DOCUMENTS

All documents will be returned to the name stated on the return envelope, unless otherwise stated on the additional information page (page 12) at the back of the declaration page.

Part B 1 Parent/Carer 1

ACCOUNTANT'S CERTIFICATE FOR SELF EMPLOYED – Completed by accountant

If both parent(s)/carer(s) are self employed, each is required to complete Part B separately.
NB: application may be submitted with Part B to follow.

Student Name

Student Date of Birth D D M M Y Y Y Y

Name of Parent/Carer who is Self Employed

Trading Name
Business Address

Estimated Profits for Trading Year 2011/12	£

ADD

Charges not allowable for tax purposes	£

DEDUCT

Capital Allowances	£

EQUALS

TAXABLE PROFITS	£

Please provide any details of any other income received during trading year 2011/12

Self Employed Parent/Carer 1	£

Date D D M M Y Y Y Y

Accountant's Name

Office Address

Accountant's Signature

Accountant's Official Stamp

NB: An SA302 is still required in order to finalise any award. This may have to be requested from HM Revenue & Customs.

Part B 2 Parent/Carer 2

ACCOUNTANT'S CERTIFICATE FOR SELF EMPLOYED – Completed by accountant

If both parent(s)/carer(s) are self employed, each is required to complete Part B separately.
NB: application may be submitted with Part B to follow.

Student Name

Student Date of Birth D D M M Y Y Y Y

Name of Parent/Carer who is Self Employed

Trading Name
Business Address

Estimated Profits for Trading Year 2011/12	£

ADD

Charges not allowable for tax purposes	£

DEDUCT

Capital Allowances	£

EQUALS

TAXABLE PROFITS	£

Please provide any details of any other income received during trading year 2011/12

Self Employed Parent/Carer 2	£

Date D D M M Y Y Y Y

Accountant's Name

Office Address

Accountant's Signature

Accountant's Official Stamp

NB: An SA302 is still required in order to finalise any award. This may have to be requested from HM Revenue & Customs.

Part C 1 Parent/Carer 1

CERTIFICATE OF BENEFITS RECEIVED – To be completed if PARENT/CARER 1 is in receipt of benefits

To be completed by student's parent/carer before submitting to DWP

Your Name _____ Student's Name _____

Your National Insurance number _____ _____ _____

Address _____

I authorise DWP to give information relating to my benefits allowances

Signature _____

You should now take this form to your local DWP Office for completion.
To be completed by the Department for Work & Pensions for the district in which the parent/carer is/was registered.

Please complete details of benefits received **at any time during the financial year 2011/2012.**

Name of additional person(s) claimed for in addition to above _____

							Taxable	Non-Taxable
From:		To:		£ per week	Type of Benefit:			
From:		To:		£ per week	Type of Benefit:			
From:		To:		£ per week	Type of Benefit:			
From:		To:		£ per week	Type of Benefit:			
From:		To:		£ per week	Type of Benefit:			
From:		To:		£ per week	Type of Benefit:			
From:		To:		£ per week	Type of Benefit:			
From:		To:		£ per week	Type of Benefit:			
Other								
From:		To:		£ per week	Type of Benefit:			

Signature of Manager/Clerk _____

Please print name _____

Date DD MM 20YY

DWP Stamp

Department for Work & Pensions Office _____

Part C 2 Parent/Carer 2

CERTIFICATE OF BENEFITS RECEIVED – To be completed if PARENT/CARER 2 is in receipt of benefits

To be completed by student's parent/carer before submitting to DWP

Your Name

Student's Name

Your National Insurance number

Address

I authorise DWP to give information relating to my benefits allowances

Signature

You should now take this form to your local DWP Office for completion.
To be completed by the Department for Work & Pensions for the district in which the parent/carer is/was registered.

Please complete details of benefits received **at any time during the finacial year 2011/2012.**

Name of additional person(s) claimed for in addition to above

							Taxable	Non-Taxable
From:		To:		£ per week	Type of Benefit:			
From:		To:		£ per week	Type of Benefit:			
From:		To:		£ per week	Type of Benefit:			
From:		To:		£ per week	Type of Benefit:			
From:		To:		£ per week	Type of Benefit:			
From:		To:		£ per week	Type of Benefit:			
From:		To:		£ per week	Type of Benefit:			
From:		To:		£ per week	Type of Benefit:			
Other								
From:		To:		£ per week	Type of Benefit:			

Signature of Manager/Clerk

Please print name

Date DD MM 20YY

DWP Stamp

Department for Work & Pensions Office

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