FOR OFFICE USE ONLY

AMOUNT AWARDED:

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| **Application for St. Catharine’s College Hardship Funding**  **Part I – To be completed by the applicant**   |  |  | | --- | --- | | **Name**: | **Year of study:** | | **Degree** (e.g. PhD/MPhil): | **Email address:** | | **Subject** (e.g. History): | **Have you applied for funds before?** **(Y/N)** |  |  | | --- | | **1. Application details**  **1(a) Reason behind your request for hardship funding:** | | **1(b) Have you received or are you applying to any other sources for hardship assistance? Please give details including amount applied for or secured, and expected date of hardship decision. If you are not applying to other sources, please state why:**  *NB: The College prioritises cases in which students have sought financial support from other sources.* | | **1(c) Please comment briefly on the extent to which your request for hardship funding was foreseeable.**  *NB: The College prioritises cases in which financial difficulty was not foreseeable.* |   **2. Details of hardship assistance**   |  |  | | --- | --- | | **Period for which you seek financial support** |  | | **Amount of College contribution sought** | **£** | | **External funding already secured:** | **£** | | **External funding applied for elsewhere:** | **£** |   **3. Postgraduate budget planner**   1. Hardship funding is not designed to be a long-term solution for postgraduates. We ask you to think carefully about your current and future financial situation, and to spend time thinking about how you intend to manage your expenses and costs going forward. 2. Postgraduates who have provided thorough budget planning will be prioritised.   **3(a) Income per month**   |  |  |  | | --- | --- | --- | |  | **Weekly**  **£** | **Monthly £** | | **Income From Employment** |  |  | | **Income From Savings/Investments** |  |  | | **Benefits (Including Child Benefit, Child Tax Credits & Income Support)** |  |  | | **Other Income Source** |  |  | | **INCOME TOTAL** | £0.00 | **£0.00** |   **3(b) Outgoings per month**   |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | |  | **Weekly**  **£** | **Monthly £** |  | **Weekly**  **£** | **Monthly £** | | **University tuition fees** |  |  | **Mobile phone** |  |  | | **College fees** |  |  | **TV Licence** |  |  | | **Other education costs** |  |  | **Eating out (e.g. coffees, restaurants)** |  |  | | **Rent** |  |  | **Insurance (e.g. car, mortgage, travel)** |  |  | | **Utilities (e.g. electric, gas, water)** |  |  | **One offs (e.g. holidays, gifts)** |  |  | | **Council tax** |  |  | **Credit card repayments** |  |  | | **Food and household shopping** |  |  | **Childcare** |  |  | | **Travel (e.g. rail, petrol)** |  |  | **Hobbies (e.g. subscriptions, cinema, gym)** |  |  | | **Savings payments (e.g. regular, ISA)** |  |  | **Other** |  |  | | **Direct debits (e.g. NHS)** |  |  | **Other** |  |  | | **INCOME TOTAL** | £0.00 | **£0.00** | **INCOME TOTAL** | £0.00 | **£0.00** |   **3(c) Current versus desired spend**   |  |  |  | | --- | --- | --- | |  | **CURRENT**  **MONTHLY SPEND** | **DESIRED SPEND** | | | | **Education** | £0.00 | £0.00 | | **Home (incl. rent, utilities, council tax)** | £0.00 | £0.00 | | **Shopping** | £0.00 | £0.00 | | **Travel (incl. insurance)** | £0.00 | £0.00 | | **Savings payments** | £0.00 | £0.00 | | **Other direct debits (e.g. NHS, mobile, TV)** | £0.00 | £0.00 | | **Eating out** | £0.00 | £0.00 | | **Other insurance** | £0.00 | £0.00 | | **One offs** | £0.00 | £0.00 | | **Credit card repayments** | £0.00 | £0.00 | | **Childcare** | £0.00 | £0.00 | | **Hobbies** | £0.00 | £0.00 | | **Other** | £0.00 | £0.00 | | **Other** | £0.00 | £0.00 | | **Other** | £0.00 | £0.00 | |  | **£0.00** | **£0.00** |   **4. Payment details and confirmation**  We will pay any successful awards directly into a UK bank account. Please provide details of your current bank account below:   |  |  | | --- | --- | | **BANK DETAILS** |  | | Name on account: |  | | Account number: |  | | Sort code: |  | | Bank name: |  |   **I confirm that the information which I have given on this application is complete and true**   |  |  | | --- | --- | | Signature (e-signature or printed): | Date: |   **Part II – To be completed by the supervisor**   |  |  | | --- | --- | | **Name**: | **Email:** | | **Department/Faculty/Research Group:** | |  |  | | --- | | **Please provide a candid assessment on the validity of this application:** | | **St Catharine's hardship funds are limited. Typically, the College provides a portion of the sum sought. Does your department or faculty have matching funds available which might be tapped?** | | **Please provide a candid assessment on the students’ progress, including the prospect of successful completion of their degree:** |   **I confirm that the information I have given here is true.**   |  |  | | --- | --- | | Supervisor’s signature (e-signature or printed): | Date: |   **Once completed, please email this application form to the Postgraduate Administrator, St Catharine’s College.**  Email: [grad.admin@caths.cam.ac.uk](mailto:grad.admin@caths.cam.ac.uk" \t "_blank) |