

2025/26

DSA1

Application for Disabled Students' Allowance (DSA)



We welcome applications in Welsh. If you would prefer to apply in Welsh, a Welsh version of this form is available. Applying in Welsh will not delay your application.

Your forename(s)

Your surname

If you have applied for student finance before,
please provide your Customer Reference Number

Instructions

- To obtain this form in an alternative format such as Braille, large print or audio please email: **brailleandlargefonts@slc.co.uk** or call **0141 243 3686**.
- **Answer all the questions.** If you leave any question blank we will not be able to process your application. If a question does not apply to you, please enter 'None' or 'N/A' as the answer.
- Please refer to the DSA1 notes each time you see this icon. 
- Whenever you see the evidence icon, you must provide evidence to support your application. Information about the evidence required can be found in the DSA1 notes and will also be marked with this icon. 
- Sign and date the Terms and Conditions.
- Return your form to: Student Finance Wales
PO Box 211
Llandudno Junction
LL30 9FU
- If you have any questions call the Student Finance Wales Contact Centre on **0300 200 4050**.

To find out how we'll use the information you provide go to

www.studentfinancewales.co.uk/privacynotice to read our Privacy Notice before completing this form.

You may be eligible for a bursary or scholarship. In order for a university or college to determine and pay any bursary or scholarship to which you may be entitled, we will share some of your personal, financial and course details as well as information about your eligibility for student finance with them. For more information about this, read our Privacy Notice.

Please contact the university or college if you require further information about their bursaries and scholarships.



Section 1 - personal details

a Personal details

Title Mr Mrs Miss Ms

Forename(s)

Surname

If you have a double-barrelled surname please ensure you put both parts of your surname with a hyphen in between, if applicable.

Any other names you may be known by

Sex Male Female Date of birth

Please complete these questions with the details exactly as stated on your birth certificate or passport.

Place of birth (town/village)

Nationality

Identity evidence details

b1 Do you hold a UK passport?

Yes

No

If 'No' go to b3

b2 Provide the following details from your **UK passport**, which must be **currently valid and not expired** (this is the easiest way for you to verify your identity and means you **do not need to send us your passport**).
If your passport is not valid or has expired, go to b3

Passport number

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Forename(s)

Surname

Date of issue

<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Date of expiry

<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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b3 If you don't have a valid UK passport you can send us a photocopy of your UK birth or adoption certificate.

If you're a non-UK national, we'll ask you for some identity information at section 3.

Section 1 - personal details

Continued

Previous loans

- c** Have you ever had any other loans from the Student Loans Company Limited (SLC)? **Yes** **No** if 'No' go to d
- If 'Yes', are you behind with the repayments? **Yes** **No**

If you are behind with repayments on a previous loan, you should not apply for student finance until you have resolved this issue.

Contact details

- d** All correspondence we issue will be sent to this address. You can update your address at any time by logging into your online account or by calling us.

Contact address

Postcode

Contact phone number

Mobile phone number

Email address

What language would you like us to use on the letters we send you?

English

Welsh

- d1** Did you move to Wales wholly or mainly for the purpose of receiving Higher Education? **Yes** **No** If 'Yes' please contact Student Finance Wales

Armed Forces

- e1** Are you a member of the Armed Forces serving outside Wales? **Yes** **No**

- e2** Are you a family member of someone in the Armed Forces serving outside Wales? **Yes** **No**
(for example: spouse or child)

Section 2 - other financial support

Bursaries and awards

If you are an **undergraduate student** in this academic year, will you be eligible to apply for:

- a Department of Health or NHS bursary (excluding the social work bursary paid by Social Care Wales); or
- a Scottish Government Health Directorate Bursary (Scottish Healthcare Allowance); or
- a healthcare bursary from the Department of Health, for Northern Ireland?

Yes No

If you are a **postgraduate student** in this academic year, will you be eligible to apply for:

- a Department of Health, NHS, Scottish Government Health Directorate (Scottish Healthcare Allowance) or other healthcare bursary; or
- a Research Council bursary; or
- a Social Care Wales bursary for students studying an approved postgraduate social work course (this only applies if you started your course before academic year 2022/23); or
- a bursary from your college or university that includes extra support because of your disability, long-term health condition, mental health condition, specific learning difficulty or autism spectrum disorder (do not count any payments you get for help with costs relating to your disability that your DSA does not cover, or payments from your college or university hardship fund)?

Yes No

If you have answered 'Yes' to either of the above questions, you will **not** qualify for DSA from Student Finance Wales. **Please do not continue with this application.** You should contact the provider of your bursary for advice on any extra support you may be entitled to because of a disability, long-term health condition, mental health condition, specific learning difficulty or autism spectrum disorder.



Section 3 - residence

Part A

Nationality

a1	Are you a UK national? <input type="checkbox"/> n <input type="checkbox"/> e	No Yes	if 'No' go to a2 now go to b1
a2	Are you an Irish citizen? <input type="checkbox"/> n <input type="checkbox"/> e	No Yes – have you been resident in the UK and Islands for the three years prior to the first day of the first academic year of your course? No Yes	if 'No' go to a3 if 'No' go to a3 now go to b2
a3	Are you the family member of a UK national, and both you and your UK national family member were living: • in the UK on 31 December 2020, after moving to the UK from the EEA or Switzerland on or after 1 January 2018; or • in the EEA or Switzerland on 31 December 2020? <input type="checkbox"/> n <input type="checkbox"/> e	No Yes – have both you and your family member been resident in the UK, Gibraltar, EEA or Switzerland for three years prior to the first day of the first academic year of your course? No Yes	if 'No' go to a4 if 'No' go to a4 now go to a19
a4	Have you been granted settled status or pre-settled status under the EU Settlement Scheme? <input type="checkbox"/> n <input type="checkbox"/> e	No Yes – settled status Yes – pre-settled status Are you an EU national and have been resident in the UK and Islands for three years prior to the first day of the first academic year of your course? No Yes - provide your: Expiry date of pre-settled status 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"/>	if 'No' go to a5 now go to a19 if 'No' go to a5 now go to a19

Section 3 - residence

Continued

a5

Are you the child of a Swiss national?

n **e**

If you have lived in the UK, the EEA, Switzerland or the Overseas Territories for the three years prior to the first day of the first academic year of your course, where at least part of that period has been spent in an Overseas Territory other than Gibraltar, you can only apply for tuition fee funding. You should complete this question then the remainder of the form.

No

if 'No' go to a6

Yes – were you resident in the UK, Gibraltar, EEA or Switzerland for three years prior to the first day of the first academic year of your course?

Yes – provide your/your parent or step-parent's information below.

No – have you been resident in the UK, the EEA, Switzerland, or the Overseas Territories, where at least part of that period has been spent in an Overseas Territory other than Gibraltar, for three years prior to the first day of the first academic year of your course?

No

if 'No' go to a6

Yes – you will only be eligible for tuition fee funding. Provide your:

Expiry date of pre-settled status

Day Month Year

If your **parent or step-parent** has settled or pre-settled status under the EU Settlement Scheme, provide their:

Expiry date for pre-settled status

Day Month Year

now go to a20

Section 3 - residence

Continued

a6

Are you or your:

- husband, wife, civil partner; or
- parent(s), step-parent; or
- child, step-child
- other direct ascending or descending line family member

an EEA or Swiss national who is working, or has worked or is looking for work in the UK?



If you have lived in the UK, the EEA, Switzerland or the Overseas Territories for the three years prior to the first day of the first academic year of your course, where at least part of that period has been spent in an Overseas Territory other than Gibraltar, you can only apply for tuition fee funding.

No

if 'No' go to a7

Yes – Have you been ordinarily resident in the UK, EEA, Switzerland, and Gibraltar for the three years prior to the first day of the first academic year of your course?

No

if 'No' go to a7

Yes – Is the person who is working, has worked or is looking for work in the UK:

You

go to a6.1

Your family member

go to a6.2

a6.1

I am working, have worked or am looking for work

Have you been resident in the UK, the EEA, Switzerland, or the Overseas Territories for three years prior to the first day of the first academic year of your course?

No

if 'No' go to a7

Yes – you will only be eligible for tuition fee funding.

Provide your:

Expiry date for pre-settled status - if applicable

Day	Month	Year
<input type="text"/>	<input type="text"/>	<input type="text"/>

Provide details of your employment. You should also provide details of your previous study.

now go to a19

Section 3 - residence

Continued

a6.2 My family member is working, has worked or is looking for work and I am their:

husband/wife/civil partner

child or step-child

parent(s)/step-parent(s) or other ascending or descending line family member (only applicable to EEA worker family members)

Provide **your**:

Expiry date of pre-settled status

Day Month Year

Provide **your family member's**:

Expiry date if pre-settled status

Day Month Year

Provide details of your family member's employment.

now go to a20

Section 3 - residence

Continued

a7 Are you the child of a Turkish Worker who is working in the UK? n e

No

if 'No' go to a8

Yes – has your Turkish worker parent/step-parent been granted extended Leave to Remain in the UK after 31 December 2020 by the Home Office?

No

if 'No' go to a8

Yes – were you and your Turkish worker parent/step-parent living in the UK by 31 December 2020?

No

go to a8

Yes

now go to a20

a8 Have you or your family member been granted leave under the Afghan Relocations and Assistance Policy (ARAP) or the Afghan Citizens Resettlement Scheme (ACRS)? n e

No

if 'No' go to a9

Yes – I have been granted leave under the ARAP or ACRS
Provide your:

Date latest status granted

Day Month Year
--

Date this status is due to expire - if applicable

Day Month Year
--

now go to a21

Yes – My family member has been granted leave under the ARAP or ACRS.

My family member is my:

husband/wife/civil partner

parent or step-parent

Date latest status granted

Day Month Year
--

Date this status is due to expire - if applicable

Day Month Year
--

now go to a22

Section 3 - residence

Continued

a9 Do you have settled status in the UK, that was not granted under the EU Settlement Scheme? n e

No

if 'No' go to a10

Yes – provide your:

Date latest status granted

Day Month Year

now go to a19

a10 Have you or your:
• husband, wife, civil partner; or
• parent(s), step-parent
been granted leave under a Ukraine Scheme? n

By Ukraine Scheme we mean:

- the Ukraine Family Scheme;
- the Homes for Ukraine Sponsorship Scheme;
- the Ukraine Extension Scheme; or
- the Ukraine Permission Extension Scheme.

No

if 'No' go to a11

Yes – I have been granted leave under a Ukraine Scheme

Provide your:

Date latest status granted

Day Month Year

Date this status is due to expire - if applicable

Day Month Year

now go to a21

Yes – My family member has been granted leave under a Ukraine Scheme.

My family member is my:

husband/wife/civil partner

parent or step-parent

Date latest status granted

Day Month Year

Date this status is due to expire - if applicable

Day Month Year

now go to a22

Section 3 - residence

a11 Have you or your:
• husband, wife, civil partner; or
• parent(s), step-parent
been granted refugee status by the UK
government? n e

No

if 'No' go to a12

Yes – I have been granted refugee status in the UK

Provide your:

Date latest status granted

Day Month Year
--

Date this status is due to expire -
if applicable

Day Month Year
--

now go to a21

Yes – My family member has been granted refugee status in the UK

Date latest status granted

Day Month Year
--

Date this status is due to expire -
if applicable

Day Month Year
--

now go to a22

Section 3 - residence

a12 Have you or your:

- husband, wife, civil partner; or
- parent(s), step-parent

been granted leave to remain as a Stateless Person? **n** **e**

No

if 'No' go to a13

Yes – I have been granted leave to remain as a Stateless Person
Provide your:

Date latest status granted

Day Month Year
 - -

Date this status is due to expire -
if applicable

Day Month Year
 - -

now go to a21

Yes – My family member has been granted leave to remain as a Stateless Person

Date latest status granted

Day Month Year
 - -

Date this status is due to expire
- if applicable

Day Month Year
 - -

now go to a22

a13 Have you or your:

- husband, wife, civil partner; or
- parent(s) or step-parent

been given:

- leave to enter or remain in the UK on the grounds of family or private life; or
- leave to enter or remain in the UK following a failed application for leave to enter or remain on the grounds of family or private life on the grounds of Article 8 of the European Convention on Human Rights (ECHR); or
- Discretionary Leave as a result of a failed asylum application; or
- Discretionary Leave where no application for asylum has been made? **n** **e**

No

if 'No' go to a14

Yes – I have been granted leave
Provide your:

Date latest status granted

Day Month Year
 - -

Date this status is due to expire -
if applicable

Day Month Year
 - -

now go to a19

Yes – My family member has been granted leave

Date latest status granted

Day Month Year
 - -

Date this status is due to expire
- if applicable

Day Month Year
 - -

now go to a20

Section 3 - residence

a14

Have you or your:

- husband, wife, civil partner; or
- parent(s) or step-parent

been granted Humanitarian Protection?

No

if 'No' go to a15

Yes – I have been granted Humanitarian Protection
Provide your:

Date latest status granted

Day Month Year
 - -

Date this status is due to expire -
if applicable

Day Month Year
 - -

now go to a21

Yes – My family member has been granted Humanitarian Protection

Date latest status granted

Day Month Year
 - -

Date this status is due to expire
- if applicable

Day Month Year
 - -

now go to a22

a15

Have you been granted leave to remain in the UK under section 67 of the Immigration Act 2016, or have you been granted leave in line as the dependent child of someone who has?

No

if 'No' go to a16

Yes – Provide your:

Date latest status granted

Day Month Year
 -

Date this status is due to expire

Day Month Year
 -

now go to a21

a16

Have you been granted Calais leave in the UK, or have you been granted leave in line as the dependent child of someone who has?

No

if 'No' go to a17

Yes – Provide your:

Date latest status granted

Day Month Year
 -

Date this status is due to expire

Day Month Year
 -

now go to a21

Section 3 - residence

a17 Have you been granted indefinite leave to enter or remain in the UK as a victim of domestic violence or abuse, or are you the child of someone who has? n e

No if 'No' go to a18

Yes – I have been granted indefinite leave to enter or remain in the UK as a victim of domestic violence or abuse

Provide your:

Date latest status granted

Day Month Year
--

now go to a21

Yes – My parent/step-parent has been granted indefinite leave to enter or remain in the UK as a victim of domestic violence or abuse

Date latest status granted

Day Month Year
--

now go to a22

a18 Have you been granted indefinite leave to enter or remain as a bereaved partner, or are you the child of someone who has? n e

No if 'No' see below

Yes – I have been granted indefinite leave to enter or remain as a person who has been a bereaved partner

Provide your:

Date latest status granted

Day Month Year
--

now go to a21

Yes – My parent/step-parent has been granted indefinite leave to enter or remain as a person who has been a bereaved partner

Date latest status granted

Day Month Year
--

now go to a22



If you answered 'No' to all the questions in this section you are not eligible for student finance from Student Finance Wales.

Section 3 - residence

Continued

Part B

a19

Provide details for yourself

What proof of identity do you have?

We will verify your details with the Home Office to confirm your identity, nationality, and residency.

Biometric residence card

Biometric residence permit

Passport

National identity card

Give these details exactly as they are on your proof of identity

Given names

Family names

Document number

Nationality on your proof of identity

you need to provide your address history - go to b2

Section 3 - residence

Continued

a20

Provide details for yourself and your family member

What proof of identity do you have?

We will verify your details with the Home Office to confirm your identity, nationality, and residency.

Give these details exactly as they are on your proof of identity

Given names

Family names

Document number

Nationality on your proof of identity

Biometric residence card

Biometric residence permit

Passport

National identity card

What proof of identity does your family member have?

If you are providing family members details you acknowledge that you must inform them. We will verify their details with the Home Office to confirm your identity, nationality, and residency.

Give these details exactly as they are on your family member's proof of identity

Given names

Family names

Date of birth

Document number

Nationality on the proof of identity

Biometric residence card

Biometric residence permit

Passport

National identity card

Day Month Year
 - -

you need to provide your address history - go to b2

Section 3 - residence

Continued

a21

Provide details for yourself

What proof of identity do you have?

We will verify your details with the Home Office to confirm your identity, nationality, and residency.

Biometric residence card

Biometric residence permit

Passport

National identity card

Give these details exactly as they are on your proof of identity

Given names

Family names

Document number

Nationality on your proof of identity

Have you lived outside the UK and Islands since your latest status was granted?

No

if 'No' go to section 4

Yes

if 'Yes' go to b3

Section 3 - residence

Continued

a22

Provide details for yourself and your family member

What proof of identity do you have?

We will verify your details with the Home Office to confirm your identity, nationality, and residency.

Give these details exactly as they are on your proof of identity

Given names

Family names

Document number

Nationality on your proof of identity

Biometric residence card

Biometric residence permit

Passport

National identity card

What proof of identity does your family member have?

If you are providing family members details you acknowledge that you must inform them. We will verify their details with the Home Office to confirm your identity, nationality, and residency.

Give these details exactly as they are on your family member's proof of identity

Given names

Family names

Date of birth

Document number

Nationality on the proof of identity

Biometric residence card

Biometric residence permit

Passport

National identity card

Day Month Year
 - -

Have you lived outside the UK and Islands since your latest status was granted?

No

if 'No' go to section 4

Yes

if 'Yes' go to b3

Section 3 - residence

b1 In the three years prior to the start of the first academic year of your course, did you live outside the UK and Islands at any time?

No

Yes

now go to b2

b2 Give details of your residence for the three years before the start of the first academic year of your course. For example: if your course starts in September 2025, we need to know where you lived between 01/09/2022 and 01/09/2025. If your course starts in March 2026, we need to know where you lived between 01/01/2023 to 01/01/2026.

There should be no gaps in the dates you give us.

Full Address

Full Address

From

Day Month Year

To

Day Month Year

Why were you there?

From

Day Month Year

To

Day Month Year

Why were you there?

Full Address

Full Address

From

Day Month Year

To

Day Month Year

Why were you there?

From

Day Month Year

To


Day Month Year

Why were you there?

now go to b4

Section 3 - residence

b3

Give details of your residency from the date you received your last status from the Home Office to the first day of the first academic year of your course. There should be no gaps in the dates you give us. 

Full Address

Full Address

From

Day Month Year

To

Day Month Year

Why were you there?

From

Day Month Year

To

Day Month Year

Why were you there?

Full Address

Full Address

From

Day Month Year

To

Day Month Year

Why were you there?

From

Day Month Year

To

Day Month Year

Why were you there?

now go to section 4

Section 3 - residence

Continued

b4

At any time since 1 September 2022 has:

- either of your parents, step-parents, guardians; or
- your husband, wife, civil partner

lived or worked outside the UK and Islands or, in the case of an EU, EEA or Swiss national, outside the UK, Gibraltar, the EEA or Switzerland?

No

Yes

if 'No' go to section 4

if 'Yes' give details below

Full Address

Full Address

From

Day Month Year

To

Day Month Year

Why were they there?

From

Day Month Year

To

Day Month Year

Why were they there?

Full Address

Full Address

From

Day Month Year

To

Day Month Year

Why were they there?

From

Day Month Year

To

Day Month Year

Why were they there?

Section 4 - about your course and your university or college



In this section, please give details of your first choice university or college and course.

University or college details

University or college name and address

Postcode

Course details

Course name

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

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

Course start date

	Month	Year			
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Course end date

	Month	Year			
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Course length (years)

Year of course

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

Are you a direct entrant? Yes No

Section 4 - about your course and your university or college

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

Postcode

Section 5 - your university or college

Please ask your university or college to complete this section.

If you do not want to tell your university or college about your disability, long-term health condition, mental health condition, specific learning difficulty or autism spectrum disorder, then please read section 5 notes for further instructions and then go to section 6 [n](#)

To be completed by the Student's university or college.

SLC or UCAS university or college code

Part-time undergraduate students

Student's course start date is on or after 1 September 2014

I confirm to the best of my knowledge and belief that:

- The student named in section 1 is studying or applying for the course named in section 4 and plans to study at a rate of **at least 25%** in this academic year; and
- The student's rate of study is % of the equivalent full-time course.

Student started their course before 1 September 2014

I confirm to the best of my knowledge and belief that:

- the student named in section 1 is studying or applying for the course named in section 4 and plans to complete the course at an average rate of study of at least 50% of that needed to complete the course, or an equivalent course, on a full-time basis; and
- The student's rate of study is % of the equivalent full-time course.

Example

The student is studying a part-time course over a six year period but would study for three years if he or she was on an equivalent full-time course. The rate of study is 50%.

Section 5 - your university or college

Full-time undergraduate students, (who are not applying for other finance) and full-time undergraduate distance learning students

I confirm to the best of my knowledge and belief that the student named in section 1 is studying or applying for the course named in section 4.

Part-time postgraduate students

Student started their course before 1st September 2014

I confirm to the best of my knowledge and belief that the student named in section 1 is studying or applying for a part-time postgraduate course which will not take more than twice as long to complete as an equivalent full-time course.

Student started their course on or after 1st September 2014

I confirm to the best of my knowledge and belief that the student named in section 1 is studying or applying for a part-time postgraduate course which will take no more than four times as long to complete as an equivalent full-time course.

All postgraduate students

I confirm to the best of my knowledge and belief that:

- the student named in section 1 is studying or applying for the course named in section 4;
- this course has a usual entry qualification of a first degree or higher; and
- the student will not receive an award from their institution (not including any payment from the institution's hardship fund or costs relating to disability that that DSA does not cover) to meet the extra course-related costs they have to pay because of their disability.

Your full name (in BLOCK CAPITALS)

Your signature

Position

Your phone number (including area code)

Your email address


University or college stamp

Date

Section 6 - DSA information and evidence

Your disability, mental health condition, long-term health condition, specific learning difficulty or autism spectrum disorder

! You are defined as having a disability under the Equality Act 2010 if you have a physical or mental impairment which has a substantial and long-term adverse effect on your ability to carry out normal day-to-day activities.

a Please give full details of the nature of your disability, long-term health condition, mental health condition, specific learning difficulty or autism spectrum disorder. If you need extra space use the additional notes page at the back of this form. 

b Is this your first application for Disabled Students' Allowance (DSA)? Yes No

if 'Yes' go to section 7

If 'No', please provide the following details of each previous DSA funding application you have made.

Date of application Funding authority applied to 

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"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

If you cannot provide evidence of each previous DSA funding application you have made, please provide full details of the funding you received in the box below.

We may contact the relevant funding authorities for further information.

Section 7 - your consent

Your consent to DSA arrangements

! Please tick the boxes below if you consent to the following DSA arrangements. This will allow us to make sure you get the help you need by exchanging information with the disability service at your university or college and your DSA supplier(s). We'll also be able to make payments for you. If you do not give consent, you will need to contact these people and make payments directly, and it may take longer to get your support in place.

You have the right to withdraw your consent to us processing your personal information in relation to this application form. To withdraw your consent, please contact us.

I agree that Student Finance Wales and the disability advisor at my university or college may exchange information about my DSA application where this is necessary to make sure I get the help I need.

I agree that Student Finance Wales and my DSA supplier(s) may exchange information about my DSA application where this is necessary to make sure I get the help I need.

I agree that Student Finance Wales can directly pay the needs assessment centre and suppliers of equipment and support.

Section 8 - your bank or building society account details

UK bank or building society account details

Where possible we will pay suppliers of your equipment or support services directly. However, please complete the section below so that we can pay you if we need to. You do not need to provide these details if you have already given them to us.

The account must be in your own name and be able to accept direct credits.

Sort code -

Account number

Building society roll number (if applicable)

Terms and Conditions

These terms and conditions (“terms”) and applicable legislation apply to all of the student finance available to students for the academic year 2025/26.

I understand that I must read the specific terms about the student finance products available because they will affect me if I apply for them at any time in this academic year.

I understand that my application for student finance may be delayed unless I sign and date these terms.

Loan Contract

1. I confirm I have read and understood these terms and A Guide to Terms and Conditions available at www.studentfinancewales.co.uk/terms-and-conditions.
2. I confirm that to the best of my knowledge and belief, the information I have provided is true and complete. If it is not, I understand that I may not receive student finance, any support I have had may be withdrawn and I could be prosecuted.
3. I understand that student finance is provided to me by the Welsh Ministers (the “Lender”) which includes any persons acting on their behalf and any replacement(s) under section 23(4) of the Teaching and Higher Education Act 1998 as amended or replaced from time to time (the “Act”).
4. I understand these terms, the Act and the regulations made under section 22 of the Act will apply to any student finance provided to me by the Lender.
5. I understand that “student finance” in these terms means financial support by way of grant(s) and/or loan(s) made by the Lender under the regulations.
6. I understand that the Student Loans Company Limited (“SLC”) carries out certain functions on behalf of the Lender.

My Obligations

7. I understand that if I have:
 - (i) reached the age of 18 years; and
 - (ii) have entered into agreement(s) for a loan under section 22 of the Act before I reached the age of 18 years,

I am agreeing to “ratify” any and all such student loans by signing these terms. This means that I confirm I entered into agreement(s) with the Lender and agree to the terms of any such previous agreement(s). If I have reached the age of 18 and refuse to “ratify” any previous agreement(s), I understand that I will not be eligible to get any further student finance under the regulations.

8. I agree to give SLC any information they need in support of this application for student finance and/or to seek repayment.
9. I agree to tell SLC immediately if my circumstances change in any way that might affect my entitlement to student finance. I understand that if I do not do this I may not get any further payments and I may have to repay the student finance



I have already received. I agree that from the date I submit my student finance application until my loan(s), together with all and any interest, penalties and charges which apply, is fully repaid I must tell SLC about any changes in my personal details (including my National Insurance number) and contact details I have provided.

10. I agree that if I get an overpayment of student finance, I need to repay this in full and that any overpayment may be taken from any future entitlement to student finance.
11. I agree that I will repay the Lender any loan(s), together with all and any interest, penalties and charges which apply. I understand that this repayment will be due by me to the Lender as a debt. If I breach any of the terms of my loan, I agree to pay any charges and penalties which apply under the Act and the regulations. I understand that I will repay my loan(s) through the United Kingdom (“UK”) tax system and/or I may repay SLC directly. If I live abroad, I will repay my loan(s) to SLC directly.
12. I agree that any loan(s) made to me in accordance with the regulations once my application is accepted by the Lender is a/are contract(s) between me and the Lender. I understand that I am liable for my loan(s) and will be charged interest from the first payment of the loan advance by the Lender.
13. I agree to tell SLC if I leave the UK to live outside the UK or if for any other reason I am outside the UK tax system for more than three months.

Legal Action and Applicable Law

14. In the event of any legal action, I agree that the laws of England and Wales will apply and that the courts of that part of the UK will hear any legal action. If my address is outside the UK the laws of the part of the UK where my education provider is situated will apply and the courts of that part of the UK will hear any legal action. I agree that the Lender has the right to take legal action against me in any other court with jurisdiction.

Sharing Information

15. If I am in breach of these terms and/or the regulations I agree that the Lender may share information held about me and my account with third parties, including the government or a government agency of another country, who may help to locate me and/or help take action to recover any payments I owe.
16. I confirm where I have provided any personal information about any other person in my student finance application, I have done so with their consent.
17. I understand that SLC will process my personal data in line with the Privacy Notice available at www.studentfinancewales.co.uk/privacy-notice which may be updated from time to time.

Disabled Students’ Allowance (“DSA”)

This section applies if I apply for DSA this academic year.

18. I understand that any equipment I receive through DSA must be used for my course of study. Where my DSA allowance has not been exhausted, I understand that it may be used to contribute toward the cost of repairs and/or replacements of equipment received through DSA. I understand that I may need to make a contribution towards repair costs where I have exhausted my DSA entitlement, modified the equipment and/or breached the terms of my

Agreement. I also understand that my DSA entitlement cannot be used towards the replacement of DSA equipment in circumstances where I have lost or misplaced any DSA equipment that my DSA entitlement funded in full or part.

- 19. I understand that if I consent to SLC sourcing my equipment and support, SLC can pay the suppliers of any approved equipment and support directly.
- 20. I understand that with my consent, SLC can make payment to the needs assessment centre on my behalf.
- 21. I understand that with my consent, SLC can make a direct payment on my behalf to third parties providing any other approved service or support to me.
- 22. If I do not agree to SLC paying the suppliers of equipment, support or other services on my behalf, I understand that I will be responsible for meeting the costs of any approved equipment, support or other services out of my DSA allowance. SLC reserves the right to request evidence of receipt of equipment, support or other services in relation to my DSA.

Childcare Grant (“CCG”)

This section applies if I apply for CCG this academic year.

- 23. I understand that if I do not provide the evidence of childcare costs within the timescales set, I may lose my entitlement. If my childcare costs are different from the estimates I have provided, further payments of my CCG may increase or decrease accordingly. If no further CCG payments are due to be paid to me, I may be liable to repay any difference.
- 24. I understand that if I do not take up my childcare, or if I change to a childcare provider who is not registered or approved, I will have to pay back any overpayment.
- 25. I confirm that neither I nor my husband, wife, civil partner or cohabiting partner have chosen to receive support for childcare from:
 - (i) the childcare element of Working Tax Credit;
 - (ii) the childcare element of Universal Credit;
 - (iii) Tax-Free Childcare; and/or
 - (iv) the NHS Bursary Childcare Allowance;and I agree to tell SLC immediately if I or my husband, wife, civil partner or cohabiting partner does receive this support. I understand that SLC may share my personal data with HMRC to check whether I get childcare support.

Customer Reference Number

Your full name
(in BLOCK CAPITALS)

Your signature (in ink)

Today's date

Checklist

Before returning this form, please make sure you have done the following:

Signed and dated the terms and conditions.

Enclosed all the evidence items as requested in the DSA1 notes. Any original evidence you send will be returned to you as soon as possible.

If applicable, your university or college has completed section 5.



Remember to pay the correct postage.

Please return your completed form and evidence to the DSA team by email at:
sfw_dsa_team@slc.co.uk

You can also send these by post to:

**Student Finance Wales
PO Box 211
Llandudno Junction
LL30 9FU**

Additional notes

If you are providing extra information please clearly mark what section and question number the information is about.

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