

Finance Use Only	
Learner Ref	_____
Authorised	_____
Processed	_____

*** INFORMATION CORRECT AT TIME OF PRINT**

RESIDENTIAL ELIGIBILITY 2022/23

The following information is required in order to determine if a student is eligible to have their fees waived, charged at a "home" rate, "international" rate or "rest of UK" (RUK) rate.

Forename			
Surname		Date of Birth	
Address			
Post Code			
Email		Telephone	
Nationality			
Course Title			

How long have you lived in the UK?

All my life **OR** From To

How long have you lived in the Scotland?

All my life **OR** From To

Please give details of your address for the three years prior to the start date of your course (from August 2019 to date).

Full Address	Date From	Date To	If you moved to Scotland please give reason for moving

Are you a UK National? Yes

If 'Yes' go to declaration - sign and date

No

If 'No' please complete details
overleaf

Please select one of the two options provided to indicate whether your immigration status is in your own name or you are named on a family member's documentation.

Is your status in the UK: a) In your own name

b) Due to the accompaniment of a family member

Please provide a copy of your passport and/or the family member you are accompanying

Please provide the name of your family member and their relationship to you below. *'Family member can mean your husband, wife, civil partner, parent or step-parent'.*

Please select your current immigration status below:

I am, or my family member is an **EU, EEA National**

I have a visa to enter the UK - please specify which type of visa _____

I am, the child of a **Swiss** or **Turkish National**

I have '**settled status**' or '**indefinite leave to enter or remain**' in the UK

I am a person, or spouse/child of a person who is an asylum seeker

I have, or my family member has **refugee status** in the UK

I have, or my family member has, been granted '**humanitarian protection**' or '**discretionary leave to remain**' in the UK as the result of an asylum claim

DECLARATION

I understand if any of the above information is subsequently found to be false I will be held responsible for all costs associated with my participation in the course.

Student signature: _____

Date: _____

IMPORTANT

- All information supplied will be treated confidentially
- The college is registered under the 1988 Data Protection Act; under "the Act" the information in this form will be stored on a computer system by the college
- The college is under a duty to protect public funds it administers and to this end may use the information provided on this form for the prevention and detection of fraud. It may also share this information with other bodies administering public funds solely for these purposes

[For further information on the way Glasgow Kelvin College processes your information, please visit:](https://www.glasgowkelvin.ac.uk/policies-procedures/)

<https://www.glasgowkelvin.ac.uk/policies-procedures/> and click on Privacy Notices

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