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| **PART A (TO BE COMPLETED BY THE STUDENT)** |
| Please tick to confirm that you fulfil all the eligibility criteria listed in the Notes for Applicants [ ]  |
| 1. **PERSONAL INFORMATION**
 |
| Title: [ ]  Mr [ ]  Mrs [ ]  Miss [ ]  Ms [ ]  Other (please specify)       |
| Surname or family name:       |
| First name(s):       |
| Student number:       |
| Nationality:       |
| Date of birth:       |
| University email address:       |
| 1. **COURSE INFORMATION**
 |
| College:       |
| Division:       |
| Faculty/department:       |
| Subject:       |
| Title of thesis:      |
| Start date of course:       |
| Expected date of thesis submission:       |
| Supervisor’s name and email address:      |

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| **PART A CONTINUED (TO BE COMPLETED BY THE STUDENT)** |
| Name of student:       | College:       |
| 1. **ACADEMIC INFORMATION**
 |
| Please give details of your higher education and qualifications obtained: |
| **Institution** | **Start date** | **End date** | **Subject and qualification** | **Result** |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
| Please list any other relevant academic information such as publications, awards or achievements:      |
| 1. **EMPLOYMENT HISTORY AND CAREER PLANS**
 |
| Please list any past or present employment you have undertaken: |
| **Start date** | **End date** | **Details of employment** |
|       |       |       |
|       |       |       |
|       |       |       |
| Please summarise your future career plans:      |

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| **PART A CONTINUED (TO BE COMPLETED BY THE STUDENT)** |
| Name of student:       | College:       |
| 1. **RESEARCH**
 |
| Please outline your research project in terms which can be understood by a non-specialist. You should explain the stage you have reached and give an indication of work still required. Please **do not expand this section** and note that **additional sheets will not be accepted**. |
|       |

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| **PART A CONTINUED (TO BE COMPLETED BY THE STUDENT)** |
| Name of student:       | College:       |
| 1. **SUPPORTING STATEMENT**
 |
| Please state your reasons for applying to the Vice-Chancellors’ Fund and highlight any circumstances that you would like to bring to the Committee’s attention. Please **do not expand this section** and note that **additional sheets will not be accepted**. |
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| **PART A CONTINUED (TO BE COMPLETED BY THE STUDENT)** |
| Name of student:       | College:       |
| 1. **FINANCIAL INFORMATION**
 |
| Please provide details of how you are funding your course. You should include details of your actual income from all sources for all years of your course. Please do not include any funding used for University or College fees. Please note that students beyond their fourth year of study are not eligible to apply to the Vice-Chancellors’ Fund. |
| **Source of income** | **Year 1** | **Year 2** | **Year 3** | **Year 4** |
|       | £      | £      | £      | £      |
|       | £      | £      | £      | £      |
|       | £      | £      | £      | £      |
|       | £      | £      | £      | £      |
|       | £      | £      | £      | £      |
|       | £      | £      | £      | £      |
| Have you made any applications to the University Hardship Fund?[ ]  Yes [ ]  NoIf yes, please give the term/year and outcome of the application(s):      |
| If you have a home fee status, have you made any applications to the Access to Learning Fund? [ ]  Yes [ ]  NoIf yes, please give the term/year and outcome of the application(s):      |
| 1. **DECLARATION**
 |
| I confirm that the information I have given on all parts of this application form is correct and complete to the best of my knowledge, and if information is knowingly incorrect my award could be revoked. |
| Signed:       | Date:       |
| Name:       |
| Please give Part B to your Supervisor, and Part C to your College Hardship Officer. Please ensure that you allow enough time for your Supervisor and College Hardship Officer to be able to complete their sections. The completed form must be sent to student.funding@admin.ox.ac.uk by **12 noon on Friday 10 February 2017** Any queries should be directed to student.funding@admin.ox.ac.uk. |

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| **PART B (TO BE COMPLETED BY THE SUPERVISOR)** |
| Name of student:       | College:       |
| The above named student is applying to the University Hardship Committee for financial assistance from the Vice-Chancellors’ Fund. Awards will be made to DPhil students of exceptional academic merit who require extra funding to complete their research. The Committee would be grateful for any comments that might be useful in their assessment of the application as well as any other matters you consider relevant. In particular, please comment on the student’s academic merit and progress. |
|       |
| In your opinion, when is this student likely to submit their thesis?       |
| Number of graduates currently supervised:       |
| Student’s position in the cohort with regard to academic ability:       |
| Signed:       | Date:       |
| Name:        | Email address: |
| Complete applications must be received by Student Fees and Funding by **12 noon on Friday 10 February 2017** to student.funding@admin.ox.ac.uk or to Vice-Chancellors’ Fund, Student Fees and Funding, Examination Schools, 75 – 81 High Street, Oxford, OX1 4BG. |

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| **PART C (TO BE COMPLETED BY THE COLLEGE)** |
| Name of student:       | College:       |
| The above named student is applying to the University Hardship Committee for financial assistance from the Vice-Chancellors’ Fund. Awards will be made to DPhil students of exceptional academic merit who require extra funding to complete their research. The Committee would be grateful for any comments that might be useful in their assessment of the application as well as any other matters you consider relevant. |
|        |
| Is the student liable for University and College fees or continuation charges? [ ]  Yes [ ]  No |
| If yes, please give amounts: | **2015/16** | **2016/17** |
| **College fee/charge** | £      | £      |
| **University fee/charge** | £      | £      |
| Is the College likely to assist the student in the next 12 months? [ ]  Yes [ ]  No |
| If yes, please give probable amount: £      |
| Signed:       | Date:       |
| Name:       | Email address:       |
| Complete applications must be received by Student Fees and Funding by **12 noon on Friday 10 February 2017** to student.funding@admin.ox.ac.uk or to Vice-Chancellors’ Fund, Student Fees and Funding, Examination Schools, 75 – 81 High Street, Oxford, OX1 4BG |