

Disability Award Application

Please do not print out this form: - fill it in on your computer, use the ‘Save As’ command, call it e.g. ‘your name.doc’ and email it to the Scholarships Manager (scholarships@innertemple.org.uk)

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| I apply to the Honourable Society of the Inner Temple for a disability grant on the grounds that I am subject to serious disability which creates difficulty for me as a student or pupil, the circumstances being as follows. I understand that the primary purpose of the Inn’s Disability Grant is to help me defray expenses that but for my disability I would not have. |

Section 1 – Details of Disability

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| **Name** |  |
| **Address** |  |
| **Telephone Number** |  |
| **Email Address** |  |

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| 1. **Please explain the nature of your serious disability - including its prognosis**
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| 1. **Please explain how the disability is expected to affect your ability to study for the Bar, apply for or undergo pupillage**
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| 1. **Please give details of the services and/or aids and/or equipment (i.e. expenses that but for my disability I would not have) that I expect that I shall require when studying for the Bar, applying for or undergoing pupillage and for which I need funding**
 |
| Describe the service, aid or equipment and please provide a brief explanation as to how it assists you | Expenses (cost) |
|  | £ |
| ii) | £ |
| iii) | £ |
| iv) | £ |
| v) | £ |
| vi) | £ |

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| **NOTE: We may seek authority from you to permit the disclosure of your medical details and we may wish to make enquiries of referees and organisations that may involve disclosure of those medical details** |

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| 1. **Please give details of the services and/or aids and/or equipment which you currently have / receive and that you depended upon because of your disability when you last studied or worked.**
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| 1. **Please supply the details of an individual or an organisation which could advise us on your requirements as detailed above and how best they may be provided for you:**
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| **Name** |  |
| **Address** |  |

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| 1. **Please set out below any reasonable adjustments which may be required as to venue, time, access or otherwise you may have if called for interview** (Please note that we may contact you for further information in order to ensure that appropriate steps are taken to meet your reasonable adjustments).
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| 1. **Please supply a reference from your GP, medical adviser, support worker or from an organisation that is concerned with your type of disability. If this causes you difficulty please explain why.**
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| **Name** |  |
| **Address** |  |
| **Position Held** |  |

Section 2 – Scholarship/ Education

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| 1. **Have you ever applied for a scholarship from Inner Temple?**
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| Yes No |

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| 1. **If you answered ‘*Yes*’ to question 5, please state in which year and award you applied for**
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| 1. **If you answered ‘*No*’ to question 5, please enter your educational details below. If you answered ‘Yes’ to question 5 but have since undertaken / completed further course(s) of study please enter details of these further course(s) below.**
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| **Course** | **Institution and Subject** | **Dates** | **Result (obtained/ expected if pending)** |
| University 1 |  |  |  |
| University 2 |  |  |  |
| University 3 |  |  |  |
| A-Levels |  |  |  |
|  |  |  |  |
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Section 3 – Financial Circumstances

If you have applied for an Inner Temple Scholarship in the preceding twelve months, you do *not* need to complete this section unless your financial circumstances have changed significantly.

**Current Financial Circumstances**

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| --- | --- | --- |
| **Income** | **Monthly** | **Annual** |
| Financial help from parents (whether given directly or indirectly) |  |  |
| Scholarships or other awards |  |  |
| Earned Income – e.g. salary |  |  |
| Other Income – e.g. interest payments, dividends |  |  |

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| **Outgoings** | **Monthly** | **Annual** |
| Mortgage |  |  |
| Rent |  |  |
| Food |  |  |
| Travel |  |  |
| Books |  |  |
| Other Expenses |  |  |

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| --- | --- |
| **Assets & Debts** | **Total** |
| Current savings |  |
| Other capital |  |
| Student loans |  |
| Bank overdraft |  |
| Credit cards |  |
| Other debt |  |

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| **Additional information** |
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**Anticipated Financial Circumstances for The Next 12 Months**

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| --- | --- | --- |
| **Income** | **Monthly** | **Annual** |
| Financial help from parents |  |  |
| Scholarships or other awards |  |  |
| Earned Income |  |  |
| Other Income |  |  |

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| --- | --- | --- |
| **Outgoings** | **Monthly** | **Annual** |
| Mortgage |  |  |
| Rent |  |  |
| Food |  |  |
| Travel |  |  |
| Books |  |  |
| Other Expenses |  |  |

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| --- | --- |
| **Assets & Debts** | **Total** |
| Current savings |  |
| Other capital |  |
| Student loans |  |
| Bank overdraft |  |
| Credit cards |  |
| Other debt |  |

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| **Additional information** |
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**Financial Circumstances of Parents (if under 25 years old) or of Spouse / Partner**

|  | **Father** | **Mother** | **Spouse/ Partner** |
| --- | --- | --- | --- |
| Occupation |  |  |  |
| **Gross Income** | **Monthly** | **Annual** | **Monthly** | **Annual** | **Monthly** | **Annual** |
| Gross Salary |  |  |  |  |  |  |
| Gross bonuses & other income |  |  |  |  |  |  |
| Self-employed income before tax |  |  |  |  |  |  |
| Dividends |  |  |  |  |  |  |
| Investment income (gross) |  |  |  |  |  |  |
| Any other unearned income (gross) |  |  |  |  |  |  |
| **Gross Earnings** | **Monthly** | **Annual** | **Monthly** | **Annual** | **Monthly** | **Annual** |
| Maintenance payments received |  |  |  |  |  |  |
| Income from state benefit |  |  |  |  |  |  |
| Income from any other sources |  |  |  |  |  |  |

|  | **Father** | **Mother** | **Spouse/ Partner** |
| --- | --- | --- | --- |
| **Gross Outgoings** | **Monthly** | **Annual** | **Monthly** | **Annual** | **Monthly** | **Annual** |
| School or University Fees |  |  |  |  |  |  |
| Maintenance payments |  |  |  |  |  |  |
| Other significant outgoings or liabilities |  |  |  |  |  |  |

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| **How many dependents do your parents, spouse or partner support (other than you) and to what extent?** |
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| **Additional information on financial circumstances** |
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