



Falkirk Council

Falkirk Council
Education Services
2 Inchyra Road
GRANGEMOUTH
FK3 9XB

EDUCATION MAINTENANCE ALLOWANCE (EMA)

SESSION 2011/12

COMPLETE FORM IN BLACK OR BLUE INK

FULL NAME OF YOUNG PERSON
LEARNING CENTRE
DATE OF BIRTH
SQA CANDIDATE NO (if applicable)

Have you received an EMA before? YES NO

A fresh application must be made each academic year including all original documentation needed to complete the assessment.

OFFICIAL USE ONLY

EMA Reference No.	Date Received	1st Check	2nd Check
Date Completed	Completed by	Date Approved	Approved By

FOR OFFICIAL NOTES

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Education Maintenance Allowances (EMA)

Additional Guidance

Both the Young Person and Parent(s) / Carer(s) must sign the Declaration Form on page 12-13.

- If you were born between 1 March 1992 and 28 February 1996 you may be eligible for an EMA.
- If you are 16 years of age or over before 30 September 2011, you may be eligible for an EMA from August 2011.
- If you are 16 years of age between 1 October 2011 and 28 February 2012, you may be eligible for an EMA from January 2012.

For a young person attending school:

- For those eligible for full year award, if the application is not submitted by **30 September 2011**, the award can only be made from the week it is received by this office.
- For those who are eligible from January 2012, if the application is not submitted by **28 February 2012**, the award can only be made from the week it is received by this office.
- The cut-off date for processing application forms for academic year 2011/12 is **31 March 2012**. No applications will be processed for that academic year after this date.

Please contact us for further information regarding deadline dates for applications made under the community / voluntary activity scheme.

- Household income is normally assessed on gross taxable household income for the period April 2010 to March 2011.
- If there is a significant change in financial circumstances within the household, a young person may be eligible to apply for an **in-year reassessment** during the current academic year. This is possible where income for the current financial year reduces by 15%, resulting in income falling into the lower band. **Contact the Local Authority for more information.**
- The maximum income thresholds for the EMA Programme, Academic Year 2011/12 are as follows:

Income (6th April 2010 – 5th April 2011)	No. of dependent children in the household	Award
£0 - £20,351	1	£30
£0 - £22,431	2+	£30

- Dependent children are all those up to the age of 16 and those over the age of 16 and up to the age 25 if they are in full time further or higher education.
- If you are receiving education while living in a foster home or children's home, and are in the care of the local authority or living independently in receipt of Income Support or contributions-based Employment and Support Allowance, you are eligible for a £30 EMA award without having to provide evidence of household income.
- If successful, you must complete a learning choices agreement and adhere to the terms of that agreement.
- If successful and applying under the school or voluntary scheme, you must attend your school / voluntary learning centre for a minimum of 21 guided learning hours per week (timetabled hours including study periods if applicable).
- If successful and applying under the activity agreement scheme, you must attend your learning centre as timetabled on your learning programme.
- If successful, you will only receive EMA payments for those weeks where you have maintained 100% attendance (including authorised absences) and acceptable punctuality and conduct.
- A young person may be eligible to receive a provisional award if a parent is temporarily unable to supply details in which a final entitlement can be made. Please detail change in circumstances and date of change in Additional Information on page 15.
- **A fresh application must be made each academic year including all original documentation needed to complete the assessment.**

Education Maintenance Allowances (EMA) Application Contact Address

A FIRST CLASS STAMP WILL NOT BE SUFFICIENT POSTAGE WHEN SENDING IN YOUR COMPLETED APPLICATION FORM. POSTAGE CHARGES ARE NOW BASED ON WEIGHT AND SIZE.

PLEASE CHECK POSTAGE PRIOR TO SENDING IN YOUR FORM. DELIVERY DELAYS DUE TO INSUFFICIENT POSTAGE MAY RESULT IN A LOSS OF PAYMENT.

Please refer to the checklist on page 14 prior to submitting your form.

Please complete the application form and send it to the following address:

Falkirk Council
Education Services (EMA)
Sealock House
2 Inchyra Road
GRANGEMOUTH
FK3 9XB

IF YOU ARE POSTING YOUR APPLICATION YOU MUST ENCLOSE A STAMPED ADDRESSED ENVELOPE (AT LEAST 9" X 6" / A5 IN SIZE) FOR PERSONAL DOCUMENTS TO BE RETURNED.

DATA PROTECTION ACT

The Council is under obligation to manage public funds properly. Accordingly, the information that you provide will be used to ensure all sums due to the Council are paid timeously, e.g. by identifying persons who are non payers of council tax and to improve the uptake of benefits.

The information may also be used to prevent and detect fraud. It is also possible that this information may be shared for the same purposes with public bodies, including neighbouring councils or other organisations which handle public funds.

- Education Maintenance Allowance (EMA) is a programme funded by the Scottish Government and administered to Local Authority Education Departments for schools throughout Scotland. The Scottish Government and Local Authorities are controllers in relation to your information.
- The information you supply shall be used for the purposes of assessment, award, payment, and where necessary, recovery of the EMA and we will provide information to the Scottish Government, all in accordance with the requirements in the Scottish Government EMA (Scotland) Business Model.
- We may check information provided by you, or information about you provided by a third party, with other information held by us. We may also get information about you from certain third parties, or give information to them, to check the accuracy of information, to prevent or detect crime, or to protect public funds in other ways, or research or statistical purposes, as permitted by law. These third parties include other government departments.
- We will not disclose information about you to anyone outside our Local Authority unless the law permits us to.

Part A

Section I(A): PERSONAL DETAILS – Completed by Young Person

Gender Male Female Date of Birth (Day/Month/Year)

First Name(s)

Surname(s)

Email Address of applicant

Current Home Address

Postcode

Home Telephone

Mobile

Section I(B): PERSONAL NATIONALITY AND RESIDENCY DETAILS

How long have you lived in the United Kingdom? From

Have you lived at your present address for longer than 3 years? Yes No

If no, please tell us your previous address(es) within the last 3 years, including those abroad.

From To

Previous Address 1

Postcode

From To

Previous Address 2

Postcode

Residency: please tick the relevant box:

UK EU/EEA National/Swiss National Settled Status/Exceptional Leave to Enter/Remain

Refugee Status/Temporary Protection/Humanitarian Protection None of these

From To

If required, please use the additional information page on page 15.

Section 2: COURSE/LEARNING CENTRE DETAILS – Completed by Young Person

2(a)

If you received an EMA award last year, to which Local Authority did you apply, and what school / learning centre did you attend?

- If you attend school, please complete section 2(b) below
- If you are applying under the community/voluntary activity agreement scheme, please complete section 2(c) on page 6

Section 2(b) SCHOOL LEARNING PROGRAMME

Name of School

Address

Postcode

Are you attending school and/or college for at least 21 guided learning hours each week? Yes No

If no, do you have flexible study arrangements to meet your particular needs, i.e. due to medical conditions?

Yes No

Please state reason why you will be attending school for less than 21 guided learning hours. Please use additional information page if needed.

Which year of study will you be undertaking? S4 S5 S6 Other

Section 2(c) COMMUNITY OR VOLUNTARY LEARNING PROGRAMME

Name of Learning Centre

Address

Post Code

Contact Details for Community/Voluntary Activity Agreement Scheme Advisor:

Name of Advisor Telephone Number

Email Address

Start Date of Course End Date (if known)

Voluntary Scheme only:

Are you attending for at least 21 hours each week?

Yes

No

If no, do you have flexible learning arrangements to meet your particular needs, i.e. due to medical conditions?

Yes

No

Please state reason why you will be attending for less than 21 hours. Please use additional information on page 15 if needed.

Section 3: BANK/BUILDING SOCIETY ACCOUNT DETAILS – Completed by Young Person

Name of Account Holder

Is the account holder the EMA applicant?

Yes No

If no, please state reason on additional information page.

Name and Address
of your Bank/
Building Society

Bank/Building Society Sort Code (6 digits)

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Account Number (8 digits)

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Any changes to your bank/building society account must be made in writing immediately to your Local Authority Education Department

Section 4: INDEPENDENT STATUS – Completed by Young Person

Do you receive Income Support or contributions-based Employment and Support Allowance in your own right?

Yes No

If yes, are you living under the care of the Local Authority or with Foster Parents?

Yes No

Do you receive Job-Seekers Allowance in your own right?

Yes No

Section 5: FAMILY DETAILS – Completed by Young Person

Who do you live with? (please tick all that apply)

Mother Father Mother's partner Father's partner My own partner

Grandparent(s) Foster parent(s) In care On my own

Other adults (adult sibling(s) / Aunt / Uncle etc Please specify

Lone parent household? Yes No **If yes, please provide proof**

How many dependent children live in your household? 1 2+

Name of Other Dependent Children	Date of Birth	Name of Nursery/School/Learning Centre

	Parent/Carer 1	Parent/Carer 2
Name (include title)	<input style="width: 90%;" type="text"/>	<input style="width: 90%;" type="text"/>

	Parent/Carer 1	Parent/Carer 2
Permanent Address	<input style="width: 90%; height: 80px;" type="text"/>	<input style="width: 90%; height: 80px;" type="text"/>

	Parent/Carer 1	Parent/Carer 2
Postcode	<input style="width: 90%;" type="text"/>	<input style="width: 90%;" type="text"/>

	Parent/Carer 1	Parent/Carer 2
Relationship to Applicant	<input style="width: 90%;" type="text"/>	<input style="width: 90%;" type="text"/>

	Parent/Carer 1	Parent/Carer 2
Occupation(s) held during tax year 2010/11	<input style="width: 90%;" type="text"/>	<input style="width: 90%;" type="text"/>

	Parent/Carer 1	Parent/Carer 2
Marital Status	<input style="width: 90%;" type="text"/>	<input style="width: 90%;" type="text"/>

	Parent/Carer 1	Parent/Carer 2
Contact Number	<input style="width: 90%;" type="text"/>	<input style="width: 90%;" type="text"/>

EMA applicants must now sign the Young Person Declaration at Section 7(A) on page 12.

Section 6(A): HOUSEHOLD INCOME – Completed by Parent(s)/Carer(s)

Have you included a relevant complete Tax Credit Award Notice (TCAN) TC602 for 2011/12 with your application form? (Please note this must detail the actual, not estimated income for 2010-11)

Yes No

If yes, please go to Section 7(B)

Section 6(B): HOUSEHOLD INCOME – Completed by Parent(s)/Carer(s)

For those where there is no TCAN available, the following income details are required.

Please enter nil value if not applicable. Values should be annual amounts for 2010/11.

TAXABLE SOCIAL SECURITY BENEFITS

	Parent/Carer 1	Parent/Carer 2
Carer's Allowance (previously called Invalid Care Allowance) <i>Including any child dependency increase.</i>	£	£
Contributions-based Jobseeker's Allowance <i>Do not include any amounts of income-based Jobseeker's Allowance. If you started work and gave your employer a P45U showing these details, do not include them here.</i>	£	£
Contributions-based Employment and Support Allowance <i>Please state any Contributions-based Employment and Support Allowance received.</i>	£	£
Incapacity Benefit <i>Include benefit paid after the first 28 weeks of incapacity (at the short-term higher and long-term rates) together with any child dependency increase. If any tax was deducted from your benefit, enter the amount due before the tax was taken off.</i> <i>Do not include benefit paid in the first 28 weeks of incapacity (at the short term lower rate) or benefit paid for a period of incapacity that began before 13 April 1995 and for which Invalidity Benefit used to be payable or any child dependency increase with these payments.</i> <i>If you started work and gave your employer a P45U showing these details, do not include them here.</i>	£	£
Income Support <i>This is only taxable if it is payable to a member of a couple and the recipient (but not the recipient's partner) is on strike.</i> <i>Do not report Income Support if it is not taxable.</i>	£	£

NON-TAXABLE SOCIAL SECURITY BENEFITS

Are you in receipt of non-taxable social security benefits? Yes No

If yes, please send part C to DWP to be completed.

EARNINGS FROM EMPLOYMENT (INCLUDING SELF EMPLOYMENT) IN 2010-11

	Parent/Carer 1	Parent/Carer 2
<p>Total gross employment income from all jobs after deduction of</p> <ul style="list-style-type: none"> • pension contributions, and • Deductions to charity via gift aid <p><i>But, before taking off</i></p> <ul style="list-style-type: none"> • tax and National Insurance contributions, and • Share Incentive Plan deductions <p><i>Include:</i></p> <ul style="list-style-type: none"> • your total profits minus losses from self-employment • any tips or gratuities you receive • any Statutory Sick Pay you received • the taxable part of any termination payments • taxable securities options gains • any strike pay you received • payments for any work done whilst you were serving a sentence in prison or on remand (this counts as income for tax credit purposes even though it is not taxable as earnings) 	£	£
<p>Deduct any allowable expenses you have incurred</p> <p>(see Guidance for completing application form 2011/12)</p>	£	£
<p>Statutory Maternity, Statutory Paternity and Adoption Pay</p> <p>Of the amount you received, <i>deduct up</i> to the first £100 for each week (for example, if you received £80 please enter 0, if you received £120 please enter £20)</p>	£	£

BENEFITS FROM YOUR EMPLOYER(S) IN 2010-2011

Type of benefit	Parent/Carer 1	Parent/Carer 2
Goods or assets	£	£
Your liabilities (bills, etc.) paid by employer	£	£
Vouchers and credit tokens	£	£
Car mileage allowances or running costs	£	£
Company cars	£	£
Car fuel	£	£
Taxable expenses payments	£	£

NOTIONAL INCOME

	Parent/Carer 1	Parent/Carer 2
Capital treated as income e.g. stock dividend	£	£
Trust Income that under the income tax rules is treated as the income of another person, e.g. investment income of a minor child where trust funds have been provided by a parent and the amount exceeds £100	£	£
Income you deprived yourself of e.g. if you sell the right to an occupational pension worth £10 a week for £2500, the £2500 should not be included but you should add £10 a week to your income	£	£
Other Income you deprived yourself of e.g. income not taken because you worked for less than the going rate (or for nothing) but where the person for whom the work was done, or for whom the service was provided, has the means to pay. This does not apply to voluntary work or employment or training programmes	£	£

UK PENSION

	Parent/Carer 1	Parent/Carer 2
Widowed Parents Allowance.	£	£
State Pension.	£	£
Other Pensions, Personal pension plan or retirement annuity contracts.	£	£

SAVINGS

	Parent/Carer 1	Parent/Carer 2
Gross income from investments/savings/shares, etc. include interest from any bank or building society accounts (this is income before tax was deducted).	£	£
Dividends If you received any company dividends add the tax amount to the dividend	£	£

PROPERTY/TRUST/FOREIGN INCOME

	Parent/Carer 1	Parent/Carer 2
Income from property or land in the UK that you owned or leased out (If this was part of your business income include it above at income from self employment)	£	£
Gross Income from a trust, settlement or deceased person's estate This is the income before tax was deducted)	£	£
Foreign Income Include the gross amount, in British pounds before any foreign tax is deducted. NB – for foreign pensions only include 90% of the gross amount received	£	£

Add totals for Parent/Carer 1 and Parent/Carer 2		£
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Now sign the parental declaration on page 13

FOR OFFICE USE ONLY

Deduction from other income if applicable		£
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OVERALL TOTAL PER ANNUM	£	£
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Section 7(a): APPLICANT (YOUNG PERSON) DECLARATION

This section must be completed by the young person applying for an EMA award.

- I declare that all the answers given in this form are true.
- I have read the guidance and understand and accept my obligations.
- I understand that if I give false information or withhold information my EMA application will be cancelled and, if necessary, action will be taken to recover any money paid to me.
- I undertake to refund any sum arising from an overpayment for any reason.
- I understand that if I do not keep to the conditions of my Learning Choices Agreement, payments may be withheld.
- I understand that if I leave my school or learning centre, I will not be eligible for any further payments.
- I understand that relevant information may be passed on to third parties within the Local Authority.
- I give permission for the local authority to release information relating to my independent status to EMA Unit.

YOUNG PERSON

Signature

Date

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Name (PRINT)

If the young person is unable to sign this form due to additional support needs, please leave blank and tick box provided.

Section 7(B): PARENTAL/PARTNER/CARER DECLARATION - This section must be completed if the applicant is under 18 years of age or the award has been assessed against the income of the applicant's parent, spouse, or carer.

- I/We declare that to the best of my/our knowledge and belief all the information given, in connection with this application, is full and correct in every respect.
- I/We undertake to provide any additional information which may be required by the Local Authority to verify the particulars given and also to inform the Local Authority immediately of any alteration in these particulars.
- I/We undertake to inform the Local Authority of any changes in financial circumstances which may affect the award.
- I/We understand that if my/our child does not keep to the conditions of their Learning Agreement, payments may be withheld.
- I/We understand that if my/our child leaves school, he/she will not be entitled to any further payments.
- I/We consent to the undertaking signed by the young person above.
- I am/We are aware that my/our child is bound by the conditions set out by the EMA guidance.
- I/We give permission for the Local Authority to release information relating to my/our household circumstances to EMA team for proof of single occupancy.

Parent/Carer 1

Signature

Date

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Name (PRINT)

Parent/Carer 2

Signature

Date

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Name (PRINT)

Please use the Checklist on page 14 to ensure all relevant documentation has been provided.

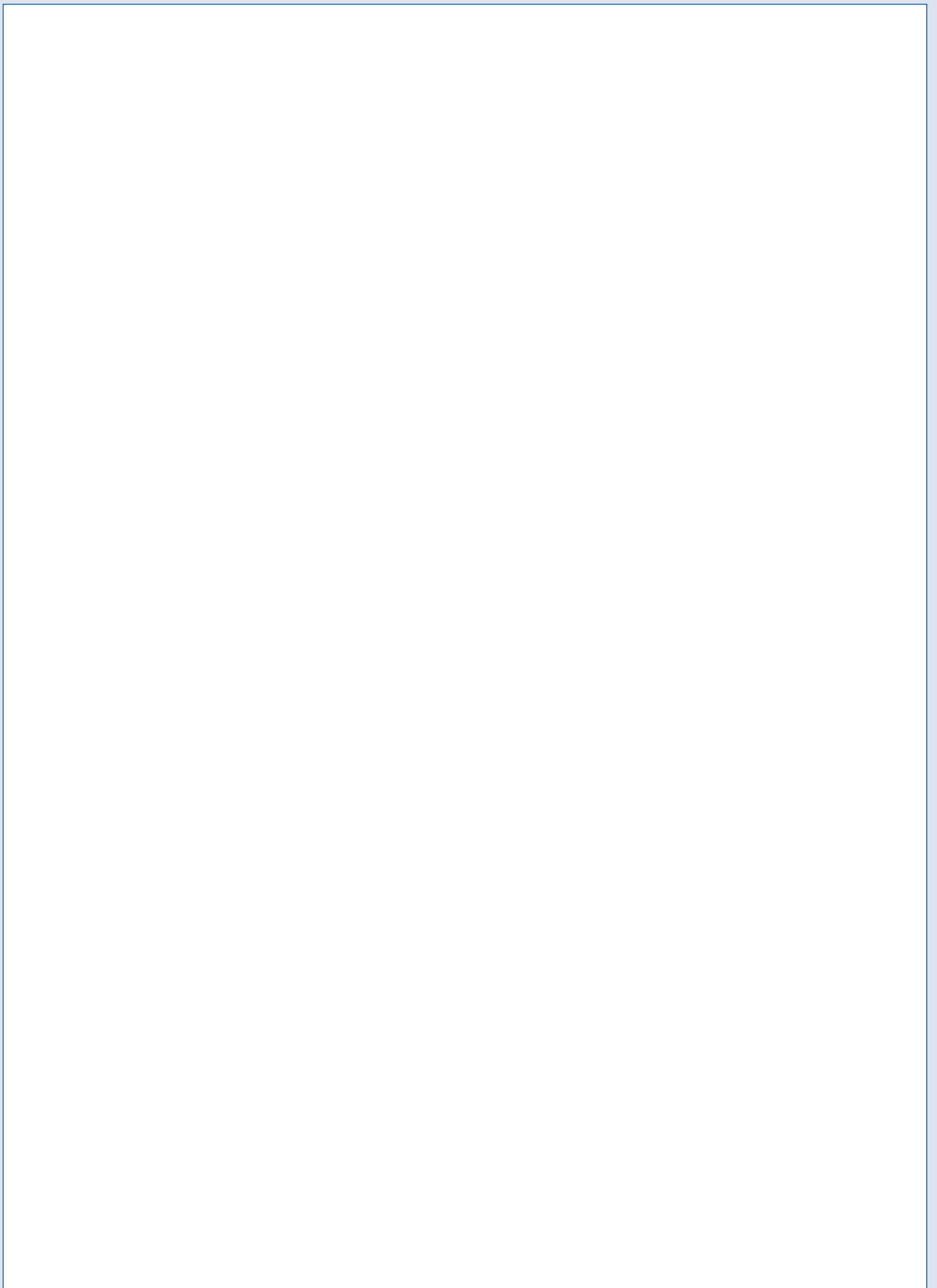
Section 8: CHECKLIST

Please ensure the following original documents are submitted with your application form
WE ARE UNABLE TO ACCEPT PHOTOCOPIES.

Failure to send in the relevant original documents will delay the processing of your EMA. A first class stamp will not be sufficient postage for this application form. Applications delayed due to sufficient postage may result in a loss of payment.

All documents will be returned to the name stated on the return envelope, unless otherwise stated in the additional information on page 15. Please check postage required.

Documentation required	Tick if enclosed	For office use only
Section 1: Original birth certificate or passport as proof of age (& residency, if applicable)	<input type="checkbox"/>	<input type="checkbox"/>
Section 4: If you are an independent young person, Part C should be completed by the Department for Work and Pensions (DWP)	<input type="checkbox"/>	<input type="checkbox"/>
Proof that you are in the care of the Local Authority, if applicable	<input type="checkbox"/>	<input type="checkbox"/>
Section 5: 2011/12 Child Benefit Award letter (proof of guardianship and other dependent children)	<input type="checkbox"/>	<input type="checkbox"/>
College/University/SAAS letter (proof of any other dependent children not shown on Child Benefit Award letter)	<input type="checkbox"/>	<input type="checkbox"/>
Current Council Tax Notice showing Single Persons Discount (proof of lone parent status)	<input type="checkbox"/>	<input type="checkbox"/>
Section 6: HM Revenue & Customs Tax Credit Award Notice (TCAN) TC602 for 2011-12 (showing actual and not estimated income for 2010-11)	<input type="checkbox"/>	<input type="checkbox"/>
P60U, DWP letter or completed Part C Certificate of Benefits Received (as proof of taxable / non-taxable benefit for 2010-11)	<input type="checkbox"/>	<input type="checkbox"/>
P45 if applicable	<input type="checkbox"/>	<input type="checkbox"/>
P60 for 2010-11	<input type="checkbox"/>	<input type="checkbox"/>
Valid week 52 / month 12 payslip	<input type="checkbox"/>	<input type="checkbox"/>
SAAS or college award letter	<input type="checkbox"/>	<input type="checkbox"/>
Statement of earnings from HM Revenue & Customs (proof of employment income)	<input type="checkbox"/>	<input type="checkbox"/>
SA302 or full accounts for 2010-11 (proof of self employment income)	<input type="checkbox"/>	<input type="checkbox"/>
Completed Part B Accountant's Certificate (temporary proof of self employment income)	<input type="checkbox"/>	<input type="checkbox"/>
Other documents you may have supplied (please specify in Additional Information on page 15)	<input type="checkbox"/>	<input type="checkbox"/>





Part B I

Parent/Carer I

ACCOUNTANT'S CERTIFICATE FOR SELF EMPLOYED – Completed by accountant

If both parents/carers are self employed, each is required to complete Part B separately.

Young Person's Name

Young Person's Date of Birth

D	D	M	M	Y	Y	Y	Y
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Name of Self Employed Parent/Carer

Trading Name
Business Address

Estimated Profits for Trading Year 2010/11	£
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ADD

Charges not allowable for tax purposes	£
--	---

DEDUCT

Capital Allowances	£
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EQUALS

TAXABLE PROFITS	£
------------------------	---

Please provide details of any other income received during trading year 2010/11:

£

Accountant's Name

Office Address

Accountant's Signature

Date

Accountant's Official Stamp

Part B 2

Parent/Carer 2

ACCOUNTANT'S CERTIFICATE FOR SELF EMPLOYED – Completed by accountant

If both parents/carers are self employed, each is required to complete Part B separately.

Young Person's Name

Young Person's Date of Birth

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Name of Self Employed Parent/Carer

Trading Name
Business Address

Estimated Profits for Trading Year 2010/11	£
--	---

ADD

Charges not allowable for tax purposes	£
--	---

DEDUCT

Capital Allowances	£
--------------------	---

EQUALS

TAXABLE PROFITS	£
------------------------	----------

Please provide details of any other income received during trading year 2010/11:

£

Accountant's Name

Office Address

Accountant's Signature

Date

Accountant's Official Stamp

Part C I

Parent/Carer I

CERTIFICATE OF BENEFITS RECEIVED – Completed by DWP.

If both parents/carers receive benefits, each is required to complete Part C separately.

TO BE COMPLETED BY YOUNG PERSON'S PARENT/CARER BEFORE SUBMITTING TO DWP:

Young Persons Name

Parent/Carer's Name

Parent/Carers National Insurance Number:

Address

I authorise DWP to give information relating to my benefits allowances

Parent/Carer's Signature

PLEASE NOW DETACH THIS FORM AND SEND IT TO THE DWP OFFICE RELEVANT TO YOUR BENEFITS & AREA IN WHICH THE CLAIM IS REGISTERED. GENERAL CONTACT DETAILS CAN BE FOUND IN THE EMA GUIDANCE DOCUMENT.

FOR DWP USE ONLY. Please complete details of benefits received at any time during the year **6 April 2010 to 5 April 2011.**

Name of any additional person(s) claimed for in addition to above

From Date	To Date	£ per week	Type of Benefit	Taxable	Non-Taxable
	£				
	£				
	£				
	£				
	£				

Any other relevant income:

From Date	To Date	£ per week	Description/Type Benefit Type of Benefit	Taxable	Non-Taxable
	£				

Signature of Manager/Clerk

Print Name

Date 20YY

DWP STAMP

Department for Work and Pensions Office

Part C 2

Parent/Carer 2

CERTIFICATE OF BENEFITS RECEIVED – Completed by DWP.

If both parents/carers receive benefits, each is required to complete Part C separately.

TO BE COMPLETED BY YOUNG PERSON'S PARENT/CARER BEFORE SUBMITTING TO DWP:

YOUNG PERSON'S NAME

PARENT/CARER'S NAME

PARENT/CARER'S NATIONAL INSURANCE NO.

ADDRESS

I authorise DWP to give information relating to my benefits allowances

PARENT/CARER'S SIGNATURE

PLEASE NOW DETACH THIS FORM AND SEND IT TO THE DWP OFFICE RELEVANT TO YOUR BENEFITS & AREA IN WHICH THE CLAIM IS REGISTERED. GENERAL CONTACT DETAILS CAN BE FOUND IN THE EMA GUIDANCE DOCUMENT.

FOR DWP USE ONLY. Please complete details of benefits received at any time during the year **6 April 2010 to 5 April 2011.**

NAME OF ANY ADDITIONAL PERSON(S)
CLAIMED FOR IN ADDITION TO THE ABOVE

FROM DATE	TO DATE	£ per week	TYPE OF BENEFIT	TAXABLE	NON-TAXABLE
	£				
	£				
	£				
	£				
	£				

ANY OTHER RELEVANT INCOME:

FROM DATE	TO DATE	£ per week	TYPE OF BENEFIT	TAXABLE	NON-TAXABLE
	£				

SIGNATURE OF MANAGER/CLERK

PRINT NAME

DATE

DWP STAMP

DEPARTMENT FOR WORK & PENSIONS OFFICE