LIVERPOOL HOPE UNIVERSITY
1844

LHSSF
Academic Year 2025/26

Date of Receipt (for office use only)

Application for support from the HE Summer Student Support Fund 2026 for **home undergraduate students**

PLEASE SUBMIT from 22nd MAY 2026 to studentfunds@hope.ac.uk

Important: Statutory Data Protection Notice: For details about how we use the data you have provided please read the student privacy notice which can be found: www.hope.ac.uk/aboutus/governance/ generaldataprotectionregulations/ privacynotices/

GUIDANCE NOTES

Applications and all supporting documentation must be received no later than Friday 14th August 2026

What is the Summer Student Support Fund?

This is money kept aside from the Student Support Fund to help students in financial difficulty over the summer period.

Who can apply for help?

The Summer Student Support Fund is open to '**home**' (UK) students who can answer **yes** to all the following statements.

- **I am registered on a full time undergraduate course.**
- **I am classed as independent by my funding body.**
- **I borrowed my full entitlement of maintenance (student) loan in 2025/26 (if eligible).**
- **I am self-supporting (I do not live with my parents/guardian during the summer months). The only exception to this is a lone parent who lives with parents.**
- **I am not able to work because I am a parent or a disabled student or the amount of money I earn from work is insufficient.**

Personal and Course Details (page 2)

Please complete in full

Basic Living Costs (page 3)

List all income and expenditure for the summer period

Documentary Evidence

You must provide documentary proof of income and expenditure items:

- Student finance entitlement letter for 2025/26
- Tenancy agreement/mortgage statement
- Child tax credit and working tax credit assessment
- Proof of any means tested benefits eg Universal Credit, Housing Benefit
- Recent wage slips
- One month's bank statement immediately prior to the date of your application (also include a statement which shows payment of the April instalment of your student funding)
- Any other relevant documentation which may support your application

If you have already applied to this Fund during term-time and supplied the above and your circumstances have not changed then you do not need to supply further evidence, **apart from a recent bank statement covering one month**.

Your application cannot be processed without all the required documentary evidence.

Payments

Payment will be made in one instalment into your nominated bank account.

- Read the accompanying guidance notes before completing this form.
- Your application will not be considered if you do not answer all the appropriate sections and attach copies of all relevant documents.

YOUR PERSONAL DETAILS

Student ID number:

Your first names (in full):

Your surname (in full):

Date of birth Your age

Address where you will be living over the summer:

Tele/Mobile number Email address

Do you live: Alone With partner/spouse With parents/guardian In shared accommodation

COURSE DETAILS

Course title:

Undergraduate Postgraduate Further Education Full time Part time

Date of start of course (mm/yy) Duration of course e.g. 3yrs Current year of study e.g. 1

DEPENDENTS

Do you have any children who are financially dependent on you? No Yes Ages (If Yes)

Do you have any adults who are financially dependent on you? No Yes

Please give details (If Yes)

If you need to, continue on a separate sheet and attach it to this form.

BANK/BUILDING SOCIETY DETAILS

Name of Bank/Building Society	Sort Code	Account Number	Roll Number*

**Only required if you want payment to go into a Building Society account.*

INCOME

Likely weekly income for the summer period

Income	You	Partner

EXPENDITURE

Likely weekly expenditure for the summer period

Expenditure (please list)	Amount

SUPPORTING STATEMENT

Please make a short statement outlining why you require financial assistance over the long vacation. *(Please continue on a separate sheet if necessary).*

DECLARATION

PLEASE COMPLETE AND SIGN THE DECLARATION

I confirm that the information supplied is correct and understand that my application may be rejected if I knowingly give false information. I accept that the University may seek further evidence necessary to substantiate my statements.

Your name (CAPITALS)	Your signature	Date