



ILA Scotland

£200 Application Form



Instructions for completing the form

IMPORTANT
PLEASE USE BLACK
INK ONLY

Please complete this form in **BLACK INK**. We scan the information you provide so please only write inside the boxed areas. Please do not mark any other areas of the form.

To help you fill in this form please read the step-by-step instructions in the separate "Notes to help you with your ILA Scotland application" or visit our website at www.ilascotland.org.uk.

If you have any questions simply call our helpline on **0808 100 1090**.

Data Protection Act 1998: We will use the information you give on this form to process your ILA Scotland application. We have a duty to protect the public funds we handle, and we may use the information you have given on this form to prevent and detect fraud. We will share this information with other organisations for the management of your account. We may also share this information with other organisations for research purposes or other follow-up activity related to ILA Scotland.

Section A Your Personal Details (Please read Note A)

Contact Information

A.1 Reference:

A.2 Name:

A.3 Address:

A.4 Date of Birth:

A.5 Gender:

A.6 Phone Number:

A.7 E-mail:

A.8 Marital Status:

Additional Details

A.9 Cross (x) this box if the details shown above are incorrect. Please make any changes in the right hand box above.

A.10 Do you currently live in Scotland? Yes No

A.11 If you answered 'No' to question A.10, are you temporarily living outside Scotland? Yes No

Education Details

Please indicate which qualifications you hold (if any) from the following list.

A.12 SCE Higher or Advanced Higher (or equivalent). Cross (x) all boxes that apply.

A.13 Higher National Certificate/Diploma (or equivalent).

A.14 Degree or post degree.

A.15 How long is it since you last participated in formal education? Currently learning In the last year In the last 3 years More than 3 years Not since leaving school



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Section B Details of Your Income (Please read Note B)

Please supply details of how much you earn. Or, if you are on any of the benefits listed below simply mark all that apply.

If none, enter '0.00'.

B.1 Your total annual income before tax. £ , .

B.2 If you have no income cross (x) this box.

You must supply evidence of any income you receive (see notes B.1 and B.2 in the separate "Notes to help you with your ILA Scotland application").

Details of your Benefits/Tax Credits

If you are on any Benefits/Tax Credits please mark all that apply from the list below with a cross (x).

- | | | | | |
|----------------------------------|-------------------------------------|-----------------------------|-------------------------------------|--------------------------------|
| B.3 Jobseeker's Allowance | <input checked="" type="checkbox"/> | B.7 Pension Credit | <input checked="" type="checkbox"/> | Cross (x) all boxes that apply |
| B.4 Income Support | <input checked="" type="checkbox"/> | B.8 Child Tax Credit | <input checked="" type="checkbox"/> | |
| B.5 Incapacity Benefit | <input checked="" type="checkbox"/> | (maximum rate) | | |
| B.6 Carer's Allowance | <input checked="" type="checkbox"/> | | | |

You must supply evidence of any Benefits/Tax Credits you receive (see notes B.3 to B.8 in the separate "Notes to help you with your ILA Scotland application").

Section C Declaration and Undertaking (Please read Note C)

Applicant Declaration

This grant is made under The Individual Learning Account (Scotland) Regulations 2004.

- To the best of my knowledge and belief, the details I have given on this form are complete and accurate.
- I agree to give you any further information you may ask for.
- I understand that if I give you false information, or do not give you complete information, you may prosecute me and withdraw the support.
- I agree to repay any amount I have received, or that has been paid on my behalf, which is more than the grant due to me.

C.1 From time to time, we would like to send you further information about ILA Scotland. If you do NOT want to receive further information by e-mail, phone or post, please let us know by marking the appropriate box or boxes with a cross (x).

E-mail Phone Post

C.2 Signature

C.3 Signature Date / /

Section D Checklist (Please read Note D)

Before you send us this form, please read the checklist below:

- Have you read the notes with this form? This will help you fill in the form correctly and will speed up your application.
- Have you answered all the questions in sections A and B? If not, your application will be delayed.
- Have you **signed** and **dated** the application in Section C?
- Have you included all the information we need? Please mark the following boxes to tell us what documents you are sending with this form (please send clear photocopies).

Please do not attach the documents using pins or staples as this may delay the processing of your application.

D.1 Evidence of income (i.e. your last 3 payslips).

D.2 Evidence of any one of your Benefits/Tax Credits listed in Section B.

D.3 Total number of documents enclosed.

For our use

If you have any questions about this form, please contact us free on **0808 100 1090**.