2024-25 Crane Fund Application Form &

Please ensure that you have the below information before applying:

- A supporting letter from your GP
- Details of the treatment requested and the treatment provider

Please note that delays in providing the above information can cause delays in the application process.

Please ensure that you are logged into your own Office 365 account when submitting this form, as your name is collected automatically and completing this form on someone else's computer will result in inaccurate data.

Please ensure you complete the following steps before completing this application form:

- 1. Talk to your College Tutor about applying
- 2. Read the eligibility criteria to ensure you are eligible
- 3. Read the application guidance

Please note that your College's Tutorial Office will be copied into all communication about your application in an effort to improve communication with Colleges about financial assistance.

The Student Funding and Fee Policy Team will use the personal information in your application form to assess your application for financial assistance and to distribute funding according to the rules of the University's Financial Assistance Funds. The data we hold on you will be supplemented by information received from your College Tutor.

We retain your information for five years following your graduation after which it is destroyed. For more information on how the University of Cambridge processes your personal information, please see <u>https://www.information-compliance.admin.cam.ac.uk/data-protection/student-data</u>

* Required

* This form will record your name, please fill your name.

Confirmation

1. I confirm that I have spoken to my College Tutor about this application and shared an offline word copy of my application form with them prior to submitting this MS Form *



🔵 No

Your details

2. Your USN (this 9-digit number can be found on CamSIS) *

The value must be a number

3. Your CRSid (eg ab123) *

4. Your date of birth *

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5. Your age *

The	value	muct	ha	~	number
Ine	value	must	pe	а	number

- 6. Your gender *
 - O Male



- O Prefer to self-describe
- O Prefer not to specify

O Other

7. Your fee status *

- O Home/UK
- Overseas

8. Your College *

- O Christ's College
- O Churchill College
- Clare College
- Clare Hall
- O Corpus Christi College
- O Darwin College
- O Downing College
- C Emmanuel College
- O Fitzwilliam College
- Girton College
- Gonville & Caius College
- O Homerton College
- O Hughes Hall
- Jesus College
- King's College
- Lucy Cavendish College
- O Magdalene College
- Murray Edwards College
- Newnham College
- O Pembroke College
- O Peterhouse
- O Queens' College
- O Robinson College
- O Selwyn College
- Sidney Sussex College
- St Catharine's College
- St Edmund's College
- St John's College
- O Trinity College
- Trinity Hall

O Wolfson College Other

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9. Your residence *

- O College accomodation
- O University accomodation
- O Private rental accomodation
- O Property owned by you or your family
- O Other

- 10. Your department/faculty or equivalent *
 - C Lauterpacht Centre for International Law
 - Animal Health Trust
 - Babraham Research Institute
 - Botanic Garden
 - O Brain Mapping Unit
 - British Antarctic Survey
 - Cambridge Centre for Teaching and Learning
 - Cambridge Crystallography Data Centre
 - Cambridge Institute for Medical Research
 - Cambridge Institute for Sustainability Leadership
 - Cambridge Systems Biology Centre
 - Cancer Research UK Cambridge Institute
 - Centre for Business Research
 - Centre for Family Research
 - Centre for Gender Studies
 - Centre for Research in Arts, Humanities and Social Sciences
 - Centre of African Studies
 - Centre of Development Studies
 - Centre of Latin American Studies
 - Centre of South Asian Studies
 - Civil engineering
 - Clinical Gerontology
 - Clinical Pharmacology Unit
 - Computer Laboratory
 - O Department of Anglo-Saxon, Norse and Celtic
 - O Department of Applied Mathematics and Theoretical Physics
 - Department of Archaeology
 - Department of Archaeology and Anthropology
 - O Department of Architecture
 - O Department of Biochemistry

- O Department of Chemical Engineering and Biotechnology
- Department of Chemistry
- O Department of Clinical Biochemistry
- O Department of Clinical Neurosciences
- O Department of Computer Science and Technology
- O Department of Earth Sciences
- O Department of East Asian Studies
- O Department of Engineering
- O Department of French
- Department of Genetics
- Department of Geography
- O Department of German and Dutch
- Department of Greek
- Department of Haematology
- O Department of History and Philosophy of Science
- O Department of History of Art
- O Department of Italian
- Department of Land Economy
- O Department of Materials Science and Metallurgy
- O Department of Medical Genetics
- O Department of Medicine
- O Department of Middle Eastern Studies
- O Department of Neo-Latin
- O Department of Obstetrics & Gynaecology
- Department of Oncology
- O Department of Paediatrics
- Department of Pathology
- O Department of Pharmacology
- O Department of Physics
- O Department of Physiology, Development and Neuroscience
- Department of Plant Sciences
- Department of Politics and International Studies

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- Department of Psychiatry
- O Department of Psychology
- O Department of Public Health and Primary Care
- O Department of Pure Mathematics and Mathematical Statistics
- O Department of Radiology
- O Department of Slavonic Studies
- Department of Social Anthropology
- O Department of Sociology
- O Department of Spanish and Portuguese
- O Department of Surgery
- O Department of Theoretical and Applied Linguistics
- O Department of Veterinary Medicine
- Department of Zoology
- O Developmental Psychiatry
- Division of Anaesthesia
- O Division of Biological Anthropology
- Electrical Engineering
- C Energy, fluid mechanics and turbomachinery
- C European Bioinformatics Institute
- O Faculty of Architecture and History of Art
- Faculty of Asian and Middle Eastern Studies
- Faculty of Biology
- Faculty of Business and Management
- Faculty of Classics
- Faculty of Clinical Medicine
- Faculty of Divinity
- Faculty of Earth Sciences and Geography
- Faculty of Economics
- Faculty of Education
- Generative Faculty of Engineering
- Faculty of English

- Given Faculty of History
- Faculty of Human, Social and Political Science
- Faculty of Law
- Faculty of Mathematics
- Faculty of Modern and Medieval Languages and Linguistics
- Faculty of Music
- Faculty of Philosophy
- Faculty of Physics and Chemistry
- Faculty of Veterinary Medicine
- Gurdon Institute
- O Hamilton Kerr Institute
- O Howard Hughes Medical institute
- O Information engineering
- Institute for Manufacturing
- Institute of Astronomy
- Institute of Continuing Education
- Institute of Continuing Education (S)
- O Institute of Criminology
- Saac Newton Institute for Mathematical Sciences
- John van Geest Centre for Brain Repair
- Judge Business School
- C Leverhulme Centre for Human Evolutionary Studies
- O Leverhulme Centre for the Future of intelligence
- MRC Biostatistics Unit
- MRC Cancer Unit
- MRC Cognition and Brain Sciences Unit
- MRC Epidemiology Unit
- MRC Human Nutrition Research
- MRC Laboratory of Molecular Biology
- MRC Mitochondrial Biology Unit
- MRC Toxicology Unit

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- Ivianutacturing and management
- McDonald Institute for Archaeological Research
- Mechanics, materials and design
- O Mongolia and Inner Asia Studies Unit
- Museum of Archaeology and Anthropology
- Museum of Classical Archaeology
- Museum of Zoology
- National Institute of Agricultural Botany
- O Neurology Unit
- Neurosurgery Unit
- Orthopaedic Research Unit
- O Polar Museum
- O Primary Care Unit
- O Renal Medicine
- Sainsbury Laboratory
- Scott Polar Research Institute
- Sedgwick Museum of Earth Sciences
- Statistical Laboratory
- The Psychometrics Centre
- Transfusion Medicine
- Wellcome Medical Research Council Cambridge Stem Cell Institute
- O Wellcome Sanger Institute
- O Whipple Museum of the History of Science
- O Wolfson Brain Imaging Centre
- O Foundation year

11. Your mode of study *

○ Full-time

O Part-time

- 12. In which term and year did you start your course? *
 - O MT 2016
 - O LT 2017
 - O ET 2017
 - O MT 2017
 - O LT 2018
 - O ET 2018
 - O MT 2018
 - O LT 2019
 - O ET 2019
 - O MT 2019
 - 🔘 LT 2020
 - O ET 2020
 - () MT 2020
 - O LT 2021
 - O ET 2021
 - O MT 2021
 - O LT 2022
 - O ET 2022
 - O MT 2022
 - O LT 2023
 - O ET 2023

 - O MT 2023

 - O LT 2024

 - O ET 2024

Other

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- 13. Your current year of study *
 - 0 1
 - 2
 - 3

 - 4
 - 5
 - 6
 - 7
 - O Other

14. Your course level *

- O Undergraduate
- O Postgraduate

15. Your undergraduate course *



- O MusB
- O BTh
- O MBBChir
- O VetMB
- O MEng
- O MMath
- O MSci
- O Other

- 16. Your postgraduate course *
 - O PGCert
 - O PGACert
 - O PGA
 - ◯ CPGS
 - O PGCE
 - O PGDip
 - O AdvDip
 - O MPhil
 - O MSTA
 - O MSt
 - O MASt
 - O MBA
 - O EMBA
 - O MRes
 - O MCL
 - O MEd
 - O MFin
 - O MLitt
 - O MMus
 - O LLM
 - O MAcc
 - O MARCH
 - O MCHIR
 - O MSc
 - O MPhil + PhD
 - MRes + PhD
 - O PhD
 - O BusD
 - 🔵 EdD
 - ◯ EngD

	○ MV	
	○ MD	
	○ VetMD	
	○ Other	
17.	When are you due to complete your course? *	
10		
18.	When is your submission deadline? (this is the date as shown on CamSIS) *	
19.	When are you planning to submit your soft-bound thesis? *	
20.	Please indicate if you fall into one of the following groups of students as identified by T	he
	Realise Project *	
	() N/A	
	Care experienced	
	Estranged	
	C Refugee	
	Asylum seeker	
	Forced migrant	
	O Young carer	
	Gypsy	
	Roma	
	Traveller	
	Showman	
	Boater	

21. Are you currently taking an intermission from your studies or planning to intermit? *

O Yes

O No

- 22. Start date of intermission *
- 23. End date of intermission *

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- 24. Please provide the name of your College Tutor *
- 25. Please provide your College Tutor's email address (please use their <u>CRSid@cam.ac.uk</u> email address) *

Your expenditure

Please set out your estimated monthly expenditure for the current academic year (£) October 2024 - September 2025.

Living costs will be compared to the University's indicative levels for maintenance provided by UG Admissions and PG Admissions for entrants in 2024/25. For undergraduates, the indicative amount for 2023/24 is £11,090 (9 months) and for postgraduates, the indicative amount for 2023/24 is £18,625 (12 months).

If your costs are higher, please ensure you provide a justification.

26. Accommodation (rent, utility bills, maintenance) *

The value must be a number

27. Food (food and beverages) *

The value must be a number

28. Personal items (clothing and footwear, health, transport, communication) *

The value must be a number

29. Social activities (recreation, culture, restaurants, events and hotels) *

The value must be a number

30. Study costs (books, course-related equipment and travel costs) *

The value must be a number

31. Childcare costs *

The value must be a number

32. Miscellaneous costs *

The value must be a number

33. Total monthly expenditure *

The value must be a number

34. Justification for higher living costs

Your financial circumstances

- 35. Have you received or are you due to receive a loan this academic year whilst studying for your current qualification? (eg UK Government UG and PG loans, US and Canadian educational loans) *
 - YesNo
- 36. Please provide the name of the student finance provider *
- 37. Please provide the amount which you receive or are due to receive this academic year towards maintenance (\pm) *
- 38. Have you received or are you due to receive any scholarships, bursaries or grants this academic year? If you receive funding for your course from a funding sponsor, please provide details e.g. a UKRI Studentship *
 - O Yes

O No

- 39. Please provide the name of the scholarship, bursary or grant *
- 40. Please provide the amount which you receive or are due to receive this academic year (£) *

41. Have you applied for additional funding or a funded extension from your funding sponsor? *

- YesNo
- N/A

42. Please provide details (including status of application and if awarded, the amount ar	and date)) *
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- 43. Please provide details of any other income that you have received or are due to receive this academic year. This may include employment wages, support from your parent/friend/partner/other family members or income received from other sources (£) *
- 44. Please provide details of any savings* you have (£)

*any money which is not committed for tuition fees or other costs that you are going to incur i.e. money that you have to spare which could pay for the medical treatment for which you are applying for support *

45. Do you have any children who are financially dependent on you? *

- O Yes
- O No

46. Please provide details (including number and age of children) *

- 47. Have you applied to the University Childcare Support Fund (for Home/UK students) or the Central Childcare Bursary Scheme (for Overseas students)? *
 - ⊖ Yes
 - O No
- 48. Do you have any adults who are financially dependent on you? *
 - YesNo
- 49. Please provide details (including their relationship to you and how much funding you provide them with this academic year) *

50.	50. Have you previously applied to any of the University's Financia	Assistance Funds whilst
	studying towards your current qualification? *	

\bigcirc	Yes	
\bigcirc	No	

- 51. Please provide details (including name of fund, status of application and if awarded, the amount and date) *
- 52. Please indicate what other financial assistance funds you have applied for or received whilst studying towards your current qualification? (eg College financial assistance) *
- 53. Have you received any funding from your department whilst studying for your current qualification? (eg for travel, study equipment) *
 - YesNo
- 54. Please provide details of funding received from department *
- 55. Have you received any funding (not including financial assistance) from your College whilst studying for your current qualification? (eg for travel, study equipment) *
 - YesNo
- 56. Please provide details of funding received from College *
- 57. Do you have private medical insurance which would cover the treatment for which you are applying for support? *

O Yes

O No

Your funding request

- 58. Please provide the name of your medical practitioner (GP) *
- 59. Please provide a statement explaining the nature, scope and duration of your illness.

In your statement please comment on the following:

- How your illness is affecting your studies
- The waiting times under the NHS for the treatment for which you are applying for support

Please try to limit your response to 400 words. *

60. Please describe what services you have already accessed from the NHS and the University and why these have not been sufficient or suitable to your individual circumstances *

61. Please choose the treatment you are applying for support with from the list below *

- Cognitive analytic therapy (CAT)
- Cognitive behavioural therapy (CBT)
- Counselling
- Dialectical behaviour therapy (DBT)
- EMDR therapy
- Physiotherapy
- Psychotherapy
- Talking therapy
- Trauma therapy
- O Other

62. Please detail the treatment for which you are applying for support.

Please include the aims of the treatment as well as an explanation as to why the treatment cannot be obtained under the NHS. $\,^*$

63. Please upload a supporting letter from your GP which should provide:

- A clinical diagnosis of your illness
- Explicit recommendation of the treatment for which you are applying for support

Supporting documentation from other treatment providers can also be submitted as additional evidence, however **please note that a GP letter is required for all applications.**

If you are unable to upload a file, this letter may be sent directly to the Student Funding and Fee Policy Team at <u>financialassistance@admin.cam.ac.uk</u>

Please note that if you do not submit a GP letter your application will normally be declined.

↑ Upload file

File number limit: 5 Single file size limit: 1GB Allowed file types: Word, Excel, PPT, PDF, Image, Video, Audio

64. Please tick this box if the supporting letter from your GP will be sent directly to the Student Funding and Fee Policy Team



65. Please provide information on the treatment and who will be delivering it.

Please state the following:

- Number of sessions required and cost per session
- Details of the medical practitioner/clinician who will be delivering the treatment, including their professional qualification
- 66. Total cost of treatment (£) *

The value must be a number

Declaration

67. I declare that I have fully disclosed details of my financial situation and that the information I have given on this form is true, correct and complete, to the best of my knowledge. If it is not I understand that I may not receive funding/financial support, any funding received may be withdrawn and I may be referred to the Student Disciplinary Procedure or other relevant authority.

I understand that information on this form may be shared with others in the University where necessary, for the purposes of verifying my eligibility for the funding claim I am making and for conducting analysis and statistical reporting into trends. *

O Yes

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