

Independent Student not Ordinarily Resident with Parents Form

Consent of Person(s)

I consent to providing SUSI with the relevant documentation and for SUSI to process this information in order to verify the address of the applicant and to establish they were not ordinarily residing with me at their point of entry to an approved course. I understand that I can withdraw my consent at any time.

DATA PRIVACY: Authorisation to use the documents of a person who is not party to a grant application to establish independent residency

W. Number			
Applicant's Name			
Parent/Legal guardian 1 Name	l's		
Parent/Legal guardian 2 Name	l's		
Parent /Legal guardian consent	1's Yes 🗆	№ □	
Parent /Legal guardian consent	2's Yes 🗆	No 🗆	
Please note the evidence sumust be for the same period address and in line with the Independent Student not or previously sent.	d as the evider acceptable ev	nce supplie vidence as o	d of the applicant's own outlined in the A14A s or her parents request
Parent or Legal Guardian 1 signature			Date
Parent or Legal Guardian 2 signature			Date
Applicant signature			Date

Please Note: Forms that are not signed by all parties will not be accepted by SUSI. This will result in delays when processing your application.