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| **Office for Students Funded Scholarship Application Form for Postgraduate Conversion Courses in Artificial Intelligence & Data Science:**  **MSc Health Data Science 2024/2025** | |
| Please read the guidance notes and terms and conditions BEFORE completing this application form to check your eligibility. All questions must be answered. Applications should be submitted electronically to [e.giorgi@lancaster.ac.uk](mailto:e.giorgi@lancaster.ac.uk). Please note that competition for scholarships is high so do ensure that your application is the best it can be. | |
| **Personal Details** | |
| First Name: | Surname/Family Name: |
| Date of Birth (dd/mm/yyyy): |  |
| **Home Address:** | |
| House number, Road /Street: | Town/City: |
| County: | Postcode: |
| **Nationality:** | |
| Do you hold British nationality? | ☐ Yes  ☐ No |
| (For non-British nationals only)  Do you have EU settled status under the EU settlement scheme? | ☐ Yes  ☐ No |
| (For non-British nationals only and those who do not hold EU settled status)  Do you have indefinite leave to remain,  with no restrictions on length of stay?  Do you require a VISA? | ☐ Yes  ☐ No  ☐ Yes  ☐ No |
| **Correspondence Address (if different)** | |
| House number, Road / Street: | Town/City: |
| County: | Postcode: |
| **Contact Details** | |
| Phone or Mobile Number: | Email address: |
| **Scholarship Eligibility Criteria** | |
| Tick all that apply | ☐ Female  ☐ Black (as defined by HESA student ethnicity codes [Student 2018/19 - Ethnicity | HESA](https://www.hesa.ac.uk/collection/c18051/a/ethnic) )  ☐ Has a registered disability |
| Additional criteria (tick all that apply) | ☐ From indices of deprivation decile 1 to 4\*  https://imd-by-postcode.opendatacommunities.org/  \*Please enter your postcode and download the spreadsheet, the  indices of deprivation will be in column F.  ☐ Care experienced student  ☐ Estranged student  ☐ Gypsy, Roma, Traveller  ☐ Refugee Child from military family, veteran, partner of military personnel |
| **Course Details (please see guidance notes for list of eligible courses)** | |
| ☐ MSc Health Data Science: Lancaster University | |
| **Personal statement (500 words maximum**). Please include the following:  • Goals and aspirations  • Reason for applying for the scholarship | |
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I declare that all the information I have supplied in this application is correct. If I am found to have submitted false information, I understand that my application and/or any scholarship award will be discontinued immediately. By submitting this Application Form, I confirm that I have reviewed and accept the terms of the Office for Students Funded Scholarship Application Form for Postgraduate Conversion Course in Artificial Intelligence & Data Science Guidance Notes and Terms and Conditions.

**Signature**:……………………………………………………………………….**Date**:……………………………………