|  |  |
| --- | --- |
| Applicant Name |  |
| UCAS ID Number |  |

# **Section A: Living arrangements & contact with parent(s)/ guardian(s)**

Please tick the option that best describes your current living arrangements and provide further information about your contact where relevant. For direction on how to complete this section, please see the First in Family Guidance document.

|  |  |
| --- | --- |
| I live with both my parents/guardians |  |
| I am from a single parent/guardian household, but I have regular contact with my other parent/guardian  *Please provide further details:* |  |
| I am from a single parent/guardian household and have no contact with the other parent/guardian, for one of the following reasons (circle the reason):   * They are deceased * They are in prison * They are not allowed to see me * We are estranged * They live in another country * Other   *Please provide further details:* |  |
| I live permanently independently from my parent(s)/guardians(s) because I have left home  *Please provide further details:* |  |

# **Section B: Parent/guardian education & employment**

This section should be completed by your parent(s) or guardian(s). For the evidence to be accepted, please ensure each section of the form has been completed.

## **Parent/Guardian One**

|  |  |  |  |
| --- | --- | --- | --- |
| Full Name |  | | |
| Relation to Applicant |  | Date of Birth |  |

### Education

Parent(s)/Guardians(s) who attended Higher Education, either within the UK or abroad, should provide a copy of their original graduation certificate with this form.

|  |  |  |  |
| --- | --- | --- | --- |
| I attended Higher Education between these years |  | and |  |
| I have not attended Higher Education | | |  |

### Employment

|  |  |
| --- | --- |
| I am unemployed |  |
| I am employed  *Please provide details of your job title and company:* |  |
| I am self-employed  *Please provide details of your job title and company:* |  |

## **Parent/Guardian Two**

|  |  |  |  |
| --- | --- | --- | --- |
| Full Name |  | | |
| Relation to Applicant |  | Date of Birth |  |

### Education

Parent(s)/Guardians(s) who attended Higher Education, either within the UK or abroad, should provide a copy of their original graduation certificate with this form.

|  |  |  |  |
| --- | --- | --- | --- |
| I attended higher education between the years |  | and |  |
| I have not attended Higher Education | | |  |

### Employment

|  |  |
| --- | --- |
| I am unemployed |  |
| I am employed  *Please provide details of your job title and company:* |  |
| I am self-employed  *Please provide details of your job title and company:* |  |

# **Section C: Declaration**

To complete your declaration please print this form, all parties sign by hand, then scan or photograph and return to [ugamedicine@lancaster.ac.uk](mailto:ugamedicine@lancaster.ac.uk). Alternatively,you can provide a digital signature using the app “docu-sign” or similar and return to [ugamedicine@lancaster.ac.uk](mailto:ugamedicine@lancaster.ac.uk).

Please be aware that we cannot accept typed signatures.

|  |
| --- |
| I declare that the information provided in this form is true and accurate. I can be contacted by Lancaster University Medical School to provide further information, if required.  Signed Applicant: ……………………………………………………………………………… Date: ……………………………  Signed Parent/Guardian 1: ……………………………………………………………….. Date: ……………………………  Signed Parent/Guardian 2: ……………………………………………………………….. Date: …………………………… |