

EAST 15

ACTING SCHOOL

AUDITION FEE WAIVER

We believe in fair access to training and therefore provide free auditions to applicants from low-income households.

ELIGIBILITY

To apply for a free audition, you must meet all of the following essential criteria:

- You are applying for undergraduate study.
- You are considered a home student for fee status purposes.
- You attended a state school.

In addition to the above essential criteria, applicants should also meet at least one of the following criteria:

- Your household income is under £25,000 per year.
- You are in receipt of benefits including disability benefits: Universal Credit, PIP, DLA.
- You have Caring Responsibilities (Young Carer/Carer).
- You will be considered to be a care leaver when you begin your training.
- You are an estranged student (not supported by your family).
- You can offer other evidence of financial hardship.

WHAT'S NEXT?

Please complete and save the form on page 2 then upload it with your East 15 Application Form along with your proof of household income. Proof of income may include:

- Personal* or parental** P60s
- Confirmation of income-related benefit payments (e.g. Jobseeker's Allowance, Universal Credit, Income Support)
- Evidence of tax return from the last full financial year (April-March)
- Evidence of how your household income has changed since your last tax return (e.g. evidence of reduced income through payslips or accounting documents showing income for last 6 months)

**if you are an independent student*

***if you are supported by more than one parent/carer, please include both of their P60s*

If you are awarded an audition fee waiver, your application and audition will be sent to the tutor for a decision. If you are unsuccessful or we require information from you in order to complete the assessment, we will contact you by email. If your Audition Fee Waiver is refused, you will be told the reason why and asked to pay the audition fee before your application can proceed any further.

This form must be completed and submitted at the time of application. If you have any difficulty uploading your form or supporting evidence please email them to e15adms@essex.ac.uk.

Please also read our full [Audition Terms and Conditions](#).

Please save and upload this form with any supporting documents when completing your East 15 Application Form.

APPLY

FULL NAME OF APPLICANT:

EMAIL ADDRESS:

Household income

Please complete the below table with your household income information, showing income from all sources before the deduction of tax.

Figures are required for the whole previous full financial year (April-March).

	PARENT/CARER OR OWN INCOME	PARENT/CARER 2
NAME	<input type="text"/>	<input type="text"/>
RELATIONSHIP TO APPLICANT	<input type="text"/>	<input type="text"/>
EARNED ANNUAL INCOME	£ <input type="text"/>	£ <input type="text"/>
INCOME-RELATED BENEFITS	£ <input type="text"/>	£ <input type="text"/>
OTHER INCOME (E.G. PROPERTY, UNEARNED INCOME ETC)	£ <input type="text"/>	£ <input type="text"/>
SUBTOTAL	<input type="text"/>	<input type="text"/>
GRAND TOTAL	£ <input type="text"/>	
	= SUBTOTAL COLUMN 1+2	

* Applicants over the age of 25 - You will need to provide details of your own income.

** Applicants under the age of 25 - There are a number of reasons why applicants under the age of 25 are unable to provide the household income of a parent or guardian. It may be that you are estranged from your parent or guardian i.e. that you do not have contact with them, or that you are, or have recently been, looked after by the state.

If any of these apply to you, please provide your own income and let us know the reason why below:

- ☐ MY PARENTS ARE NO LONGER ALIVE
- ☐ I AM, OR HAVE RECENTLY BEEN, LOOKED AFTER BY THE STATE
- ☐ I AM ESTRANGED FROM MY PARENT OR GUARDIAN
PLEASE GIVE BRIEF DETAILS IN THE BOX BELOW

You may use the space below for any further information which you would like us to consider, or to provide further explanation regarding the income provided:

Please confirm which evidence you have included with your application:

- ☐ PERSONAL OR PARENTAL P60s
- ☐ CONFIRMATION OF INCOME-RELATED BENEFIT (E.G. JOBSEEKER'S ALLOWANCE, UNIVERSAL CREDIT)
- ☐ EVIDENCE OF TAX RETURN FROM PREVIOUS FULL FINANCIAL YEAR (APRIL-MARCH)
- ☐ EVIDENCE OF TAX REDUCTION SINCE THE PREVIOUS APRIL

Declaration: I declare that to the best of my knowledge and belief that all of the information provided is true and I have given a full statement of my household income from all sources during the periods shown. I understand that I could be asked to provide further evidence to support the above financial information and that giving false information may lead to myself/my child being disqualified from receiving a free audition.

SIGNED (APPLICANT):

SIGNED (PARENT/CARER):

DATE:

DATE: