

## Confirmation of Estrangement form 2026/27

We welcome applications in Welsh. If you would prefer to apply in Welsh, a Welsh version of this form is available. Applying in Welsh will not delay your application.

### About this form

You need to complete this form to confirm that you're estranged from your parent(s). To be considered estranged from your parent(s), you need to show that you have no contact, or very limited contact, with your biological or adoptive parent(s) and this is not likely to change. We understand estrangement can be for many different reasons.

Some common examples of estrangement are:

- You are living with friends, or with other family members such as aunts/uncles/grandparents.
- You have only ever known one of your parents and they have recently passed away.
- You still have very limited contact with your parent(s) for specific reasons, for example keeping in contact with siblings.

This isn't an exhaustive list. We review all applications on a case-by-case basis.



You can still be assessed for a Tuition Fee Loan and some Maintenance Loan until we can confirm your circumstances.

### How to complete this form

This form is split into three sections:

**Section 1** - Check your details and confirm how your third party will be using this form. Pass the form to your third party.

**Section 2** - Your third party needs to complete this section.

**Section 3** - If you want your third party to provide details of your estrangement on this form, they also need to complete this section.

**Third party declaration** - Your third party needs to sign and date this declaration before passing the form back to you.

**Student declaration** - Check the information provided by your third party is correct. Sign, date and return this form.

#### Who can be a third party

This form needs to be completed by 'an independent person of good standing in the community' who knows the details of your estrangement from your parent(s). This could be:

- your university/college lecturer
- a teacher
- your support worker
- your social worker
- a doctor
- a solicitor
- your Welfare Advisor
- your university/college's named contact for estranged students

#### This person can't:

- live at the same address as you
- be related to you by birth or marriage/civil partnership
- be your partner



## Section 1 Your personal details

1.1 Customer Reference Number

1.2 Personal details

Forename(s)

Surname

Date of birth (DDMMYYYY)

1.3 Will your third party be providing the details of your estrangement on this form?

Yes

pass this form to your third party

No

we need to contact your third party to confirm the details of your estrangement, go to 'Consent to share'

## Consent to share



Please tick the box below to give consent for your information to be shared as described in the statement. This will allow us to make sure you get the help you need by exchanging information with the necessary people. If you do not give consent it may delay any support you need.

**You have the right to withdraw your consent to us processing your personal information in relation to this application form. To withdraw your consent, please contact us.**

I agree that Student Finance Wales and the third party named in my application may exchange information about my application for estrangement where this is necessary to make sure I get the help I need.

Now pass this form to your third party

## Section 2 To be completed by the third party

### Information for the third party

Read 'Who can be a third party' on page 1 and make sure you fit the criteria.

Complete **section 2** of this form. If the student has answered 'Yes' to **question 1.3**, also complete **section 3**. Sign and date the **declaration**, then pass the form back to the student. The Third Party will not be held liable for any inaccuracies provided on this form regarding the estrangement details.

To find out how we'll use the information you provide go to [www.studentfinancewales.co.uk/privacynotice](http://www.studentfinancewales.co.uk/privacynotice) to read our Privacy Notice before completing this form.

#### 2.1 Your details

Full name

Current employer and occupation

Work address

Postcode

Contact phone number (including area code)

Work/business phone number

Email address

#### 2.2 How long have you known the student?

If you have known the student for less than 12 months, you may wish to see evidence of their circumstances.

Years      Months  
  /

## Section 2 To be completed by the third party

2.3 What is your relationship to the student?

2.4 When did you first become aware of the student's estrangement?

Month Year

<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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2.5 Has the student been in contact with either parent in the last 12 months?

No  
Yes - please give details below

2.6 Do you see the situation between the student and their parent(s) changing in the foreseeable future?

No  
Yes - please give details below

If the student has answered 'Yes' to question 1.3, complete section 3 on the next page

## Section 3 To be completed by the third party

### 3.1 If the student has given you permission to do so, tell us your understanding of their estrangement and when this happened.

- What is their current situation?
- What led to them being in this situation? (This information isn't mandatory, but it may help us to process the application more quickly.)
- Confirmation that the student isn't in contact with either parent.

Continue on a separate sheet of paper if you need to.

## Third party declaration

**This declaration should be read, signed and dated by the third party who completed sections 2 and (if applicable) 3.**

**By completing this declaration I confirm that:**

- I do not live at the same address as the student;
- I am not related to the student by birth, marriage or civil partnership;
- I am not in a personal relationship with the student (for example, they are not my partner); and
- to the best of my knowledge and belief, the information I have provided is true and complete. If it is not, I understand the student may have their financial support withdrawn.

Your full name (in BLOCK CAPITALS)

Your signature

Today's date (DDMMYYYY)

**Now pass this form back to the student**

# Student declaration

## By completing this declaration I confirm that:

- to the best of my knowledge and belief, the information provided by me and the third party is true and complete. If it is not I understand I may not receive financial support and any support I have received may be withdrawn.

Your full name (in BLOCK CAPITALS)

Your signature

Today's date (DDMMYYYY)

# Student checklist

Before you return this form please make sure that:



you have checked the information in **section 1** is all correct



you have completed the consent to share on page 2, if applicable



**sections 2 and 3** (if applicable) have been completed by someone who fits the criteria shown on page 1, and they have signed and dated the **declaration** on page 5



you have signed and dated the **student declaration**

Return the completed form to: **Student Finance Wales**  
**PO Box 211**  
**Llandudno Junction**  
**LL30 9FU**



**Remember to pay the correct postage**