**APPLICATION GRANT PSYCHOSOCIAL COUNSELING ACADEMIC YEAR 2023-2024**

**IMPORTANT**

* An approval is always for **10 sessions**. After these 10 sessions, there is **no automatic renewal**. If you need more sessions, you apply again before the start of the 11th session.
* You pay a **personal contribution directly to the therapist**, as specified in the approval that you will receive by mail.
* At renewal, your personal contribution can be increased.
* In case of **discontinuation of the studies**, the financial compensation by the Office of Student Support ceases immediately.
* If you graduate in February, the financial contribution stops on 1 March of the academic year in question. If you graduate in June or September, you can apply for financial assistance until 1 October.
* If you do not appear on the agreed consultation **without a valid reason**, the Office of Student Support will not provide any compensation for this consultation and you have to pay for this personally.

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| --- |
| Motivation grant for psychosocial counseling *(mandatory)*: Add motivation |

1. **Administrative data**

|  |  |
| --- | --- |
| Name and first name: **…** | |
| Nationality: **…** | |
| I qualify for a study grant in 2022-2023  Yes  No | |
| I am eligible for an increased contribution from the health insurance fund?  Yes  No  **! Please add a proof of the increased contribution to this application** | |
| Studies: **…** | Year: Choose |

1. **Family situation of the student on 31/12/2023– *indicate what is applicable***

I live with both parents   
 I live with one single parent  
 I live with one parent who has remarried or legally cohabited with a new partner  
 I live with one parent who actually lives with a new partner  
 They have/don’t have common children  
 I am married or legally cohabiting  
 I actually live with a partner with whom I have/don’t have common children   
 I live alone with/without children   
 I live with a family member/foster parent(s)/guardian

Has your family situation changed after 31 december 2021?

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| --- |
| Yes, since year What change? …. |
| No |

|  |
| --- |
| Did your parent or did you yourself receive alimony in 2021? If so, what was the annual amount? … |
| Number of dependent children (student included) on 31 December 2023: Choose a number |
| Number of persons in higher education on 31 December 2023: Choose a number |
| Number of persons with disabilities in the family (+66%) on 31 December 2023: |

1. **Data therapist**

|  |  |  |  |
| --- | --- | --- | --- |
| Name |  | | |
| Address |  | | |
| Mobile no. |  | e-mail address |  |
| Price per consultation: € **…** | | | |
| Number of consultations held with this therapist: … | | | |

1. **Documents to be added**

**Always scan the following documents and add them to your application (via mail or USB stick)**

**Decision letter** Department of Scholarships and study grants academic year 2023-2024

**OR**

If there is no decision yet:

* A copy of the **tax** **return** of the income of 2021 (the tax year 2022) of the person providing for the student ([www.myminfin.be](http://www.myminfin.be)),
* A proof of the amount of the **alimony** **fee** of **2021** (or 2023), if the parents are divorced,
* A proof of the **income of 2023** (certificates of employers, services or institutions), if this income is lower than the income of the year 2021,
* A **certificate of family composition** (<https://www.vlaanderen.be/attest-van-gezinssamenstelling> ).

1. Proof of the increased contribution from the health insurance fund

**How to submit this application?**

* Sign manually or digitally: with card reader and your ID card + the PIN of your ID card or with [www.docusign.com](http://www.docusign.com)
* Send the form and additional documents in **1 PDF** to the Student Support staff member of your study programme.



**The beneficiary agrees to the following:**

* Any incompleteness in the statements or the providing of incorrect information may result in the termination of payments and reclaiming of the allowance.
* The student agrees that the referrer of the Office of Student Support and the therapist may briefly exchange information concerning the assistance request/proceeding of the counselling, aimed at the organisation of qualitative assistance.
* De therapeut de dienst Studentenvoorzieningen informeert over het aantal consulten en over de eventuele noodzaak aan verdere begeleiding.
* The student agrees that the therapist informs the Office of Student Support on the number of consultations and possibly the necessity of further counselling.

Datum: 12/06/2023 Student signature for approval  
 *(typing your name is not enough, a (digital)   
 signature is required)*



All the information you provide us will be treated as strictly confidential. It is only used to verify if you are eligible for student finance. You have the right to review all data collected by us and, if necessary, to have it corrected (Belgian law of 8 December 1992 on Processing of Personal Data). To do this you can send a letter to the head of department of student services, Hoogpoort 15, 9000 Gent. After graduation or discontinuation of your studies, all data will be removed.

The employees of student services are bound to professional secrecy. Students who apply for the services of this department agree with the shared professional secrecy of the employees of student services concerning internal consultation about student financing, psychological counselling and referral.