

## Exceptional Circumstances Student Parking Form 2026-27

### How we use your personal data

All personal data is held securely by the University and will be stored and used in compliance with the Data Protection Act 2018 and the General Data Protection Regulation (EU) 2016/679. We will not divulge your information to any third parties apart from applicants who are assigned a place with one of our Nomination accommodation providers for purposes of contact and contract details.

We may recommend disclosure of relevant information to the appropriate personnel to ensure your support across the University. These can include:

- Residence Life Team
- Director of Campus Services
- Student Support and Safeguarding
- Security Team
- University Medical Centre
- Students' Union Advice & Support
- Your academic supervisor or personal tutor

We will advise you if we feel it is necessary to make any further disclosures to other personnel not listed above. The University cannot guarantee to arrange appropriate support if adequate disclosure of disability or medical history is not made in writing at the time of application.

By submitting this form, you agree to us holding and disclosing personal and statistical information in appropriate ways. You also confirm that the information you have provided is true and correct at the time of submitting your application.

### Signature and agreement

By signing the agreement section below, you agree to us holding and disclosing personal and statistical information in appropriate ways. You also confirm that the information you have provided is true and correct at the time of submitting your application.

X

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Please write your signature here

Name (block capitals):

Date:

### Personal details

1. First name:
2. Preferred name (if different to first name):
3. Family name/Surname:
4. University of Bath email address:

*This has been provided to you by the University and is made up of your initials followed by a set of numbers (e.g. Joe Bloggs - [jb2026@bath.ac.uk](mailto:jb2026@bath.ac.uk)). If you applied for University accommodation through the [accommodation portal](#), this is the username you would have used to log in there.*

5. Personal email address:
6. Contact phone number:

## Study details

7. Student type:  
Undergraduate                       Postgraduate Taught

Postgraduate Research  Other (please detail):

8. University of Bath student number:  
*This is a 9-digit number. The first 2 digits represent the year you enrolled at the University, unless you deferred your place (e.g. if you enrolled in 2026, the first 2 digits will be 26). If you already have access to your library card, your student number can be found on there.*
9. Are you living in University Accommodation (If you are living in University Accommodation you will not be eligible for a parking permit unless agreed as part of your Additional Requirements application)?  
  
Yes  - continue to 11  
No
10. If no, please include your Term Time address and postcode:

## Your conditions and circumstances

11. Do you consider yourself to have any neurological conditions?  
*This could include a type of neurological condition or seizures.*  
  
Yes                       No                       Not sure
12. Do you consider yourself to have any forms of neurodivergence?  
*This could include Autism, a Specific Learning Difficulty (SpLD) such as ADHD, dyslexia, dyspraxia, etc, or other forms of neurodivergence.*  
  
Yes                       No                       Not sure
13. Do you consider yourself to have any chronic health conditions?  
*This could include allergies, an autoimmune disorder, cancer, a cardiovascular condition, fatigue*

*conditions, gastrointestinal conditions, an infectious disease, a respiratory disability, a skin condition, or other forms of chronic health conditions.*

Yes       No       Not sure

**14.** Do you consider yourself to have any physical or sensory disabilities?

*This could include a physical disability, a hearing impairment, a visual impairment, or other forms of physical or sensory disabilities.*

Yes       No       Not sure

**15.** Do you consider yourself to have any mental health or psychological conditions?

*This could include a long-term mental health condition, a condition related to trauma, Obsessive Compulsive Disorder (OCD), or other forms of long-term mental health or psychological conditions.*

Yes       No       Not sure

**16.** Are your additional requirements for accommodation the result of a medical intervention, procedure or surgery, or associated ongoing treatment?

Yes       No       Not sure

## Your needs

**17.** Please indicate which of the following apply to your transport situation:

I have a Blue Badge	<input type="checkbox"/>
I receive the higher rate mobility component of the Personal Independent Payment	<input type="checkbox"/>
I use a Motability vehicle as my mode of transport	<input type="checkbox"/>
I am unable to use public transport	<input type="checkbox"/>
I am unable to use a taxi funded by the Disabled Student Allowance as I haven't applied for the Disabled Student Allowance	<input type="checkbox"/>
I am unable to use a taxi funded by the Disabled Student Allowance as I am ineligible for the Disabled Student Allowance	<input type="checkbox"/>
I am unable to use a taxi funded by the Disabled Student Allowance as this wasn't recommended for me	<input type="checkbox"/>
I am unable to use active transport eg cycling, walking or wheeling	<input type="checkbox"/>

**18.** Please explain about how your individual circumstances/condition affects your parking requirements, especially in relation to the needs identified in the previous question:

## Other information and feedback

For further information, please follow the link: [Help if you're a student with a learning difficulty, health problem or disability: Disabled Students' Allowance - GOV.UK](#)

At the initial stage we do not require you to provide additional documentation to support this application. However, we reserve the right to request confirmation of the declarations you have made above.