

## 16-19 Bursary Fund Application Form

Please complete this form in conjunction with the Application Notes

### Section 1 – Student and Bank Account Details

<b>Surname</b>	
<b>First Names</b>	
<b>Date of Birth</b>	
<b>Address</b>	
<b>Post Code</b>	
<b>Email</b>	
<b>Phone</b>	
<b>Mode of transport to Sixth Form</b>	(e.g.) walk, car, public bus, school bus
<b>Subjects studied in 6<sup>th</sup> Form</b>	
<b>Residency</b>	Have you always resided in the UK?      YES                  NO  If NO, please state date of entry to the UK:

To receive payments, you need to have a bank account in your own name. If you do not have a bank account, you will need to open one before completing this form.

<b>Name of Account Holder:</b>
<b>Name of Bank:</b>
<b>Branch:</b>
<b>Sort Code:</b>
<b>Account Number:</b>

## Section 2 – Parent/Carer Details

<b>Surname</b>	
<b>First name</b>	
<b>Address</b>	
<b>Postcode</b>	
<b>Mobile Phone</b>	
<b>Email address</b>	
<b>Number of dependent children in the household</b>	
<b>Household Income (please attach required evidence to this application form – see notes attached)</b>	

This application for support is made under the following category (please tick ONE box):

<b>High Priority (Vulnerable Group Bursary)</b> Please complete section 3 of the Application	
<b>Medium Priority (Discretionary Bursary)</b> Please complete section 4 of the Application	
<b>Low Priority (Discretionary Bursary)</b> Please complete section 5 of the Application	



## Section 4 – Application for Medium Priority Funding (Discretionary Bursary)

This form should be completed alongside sections 1, 2, 6 and 7, and should be submitted with the appropriate evidence (see application notes)

**I wish to apply for Medium Priority funding under the following criteria: (please tick)**

My gross annual household income is below £20,000 <b>or</b>	
I am in receipt of Free School Meals and/or I am on the Pupil Premium register	

I am attaching to this form the following evidence to support my application:

## Section 5 – Application for Low Priority Funding (Discretionary Bursary)

This form should be completed alongside sections 1, 2, 6 and 7, and should be submitted with the appropriate evidence (see application notes)

**I wish to apply for Low Priority funding under the following criteria: (please tick)**

I am in receipt of Free School Meals	
My gross annual household income is between £20,000 and £25,000	
I have another identifiable financial need (please detail below):	

I am attaching to this form the following evidence to support my application:

## Section 6 – How will the funds be used

Please provide details of how the bursary funds, if awarded to you, will be used, and the estimated cost. Estimated costs will help us to ensure funds are spent appropriately and will not necessarily affect the level of payment.

Expense	Details	Estimated Costs
Transport and travel		
Dress code items		
Subject related technology		
Subscriptions		
Essential books and stationery		
Specialist equipment and materials		
Course related trips		
UCAS costs		
Travel to open days and interviews		
School meal top ups		
Other costs (please specify)		

## Section 7 – Declaration

I/we have read and understood the guidance notes supplied with this application form.

I/we confirm that the details provided on this application form are true and accurate.

I/we confirm that the evidence provided is true and is an accurate reflection of my/our financial position.

I/we undertake to inform the school immediately in writing if my/our circumstances change.

I/we understand that if the student leaves school he/she will not be eligible to receive further payments.

I/we understand that the payment of any award is conditional upon the student meeting his/her obligations regarding attendance, punctuality, behaviour and performance.

I/we understand that the information provided may be shared with other agencies or organisations, as allowed by law, for the purpose of checking this application and/or the prevention of fraud.

I/we confirm that the student is eligible for support from the 16-19 Bursary on residency grounds and will provide suitable supporting evidence if required.

<b>Signed by the student</b>		<b>Date</b>
<b>Signed by parent/carer</b>		<b>Date</b>
<b>Signed by parent/carer</b>		<b>Date</b>

### ***For Office Use only***

<b><i>Date application received:</i></b>
<b><i>Date application reviewed:</i></b>
<b><i>Bursary Awarded (Y/N):</i></b>
<b><i>Reasons for acceptance or decline of award:</i></b>
<b><i>Level of support (High/Medium/Low):</i></b>
<b><i>Type of Evidence provided (copies attached):</i></b>
<b><i>Letter sent to student/parent:</i></b>