

16-19 Bursary Fund Application Form 2016/17



The following application form should be used to apply for financial support.

Please complete all questions to the best of your ability. Further information can be found on the Financial Support Information sheet attached. We are unfortunately unable to process incomplete applications (**which include forms with missing supporting evidence**) so please see advice from the Bursary Fund Administrator if you are unsure.

Every applicant is required to complete sections 1, 2, 3, 4 & 5. Before submitting your application please see the checklist on the last page to ensure you have included everything you need to. Where you see this symbol

* it means you need to provide some evidence with your application.

Section A – To be completed by student:

1. Student Details:

Surname/Family Name:	
First Names:	
Date of Birth	
Age on 31 st August 2016	
Home Address	
Post Code	
E-mail address	
Home Phone	
Mobile Phone	
Are you currently in receipt of free school meals? YES / NO	

2. Student Bank or Building Society Details:

<i>To receive payments, the student must have a bank account in their own name that will accept BACS payments. If you do not have a bank account, you need to open one before completing this form.</i>	
Name of Account Holder	
Name of Bank	
Branch	
Sort Code	
Account Number	
Roll Number (if applicable)	

Section B – To be completed by Parent/Carer:

3. Financial Circumstances:

What are your living arrangements?	Living with both parents	
	Living with single parent	
	In Care*	
	Living alone or in shared accommodation	

* If you are living in care we will require written evidence from the Local Authority

Parent/Carer Details:

Adult 1:	Adult 2:
Mr/Mrs/Ms/Miss	Mr/Mrs/Ms/Miss
Full Name:	Full Name:
Home Address:	Home Address:
Postcode:	Postcode:
Home Phone	Home Phone
Mobile Phone	Mobile Phone
Relationship to young person:	Relationship to young person:

What was your total household income for the Tax Year 2015-16?	
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My household is in receipt of: (please provide evidence of all that apply) *	Salary from Employment	
	Income from Self Employment	
	Income Support	
	Working Tax Credit	
	Jobseeker's Allowance	
	Employment Support Allowance	
	Child Tax Credit	
	Council Tax Benefit	
	Housing Benefit	
	Disability Living Allowance	
Guaranteed Element of Pension Credit		
Other benefits (Please Specify)		

* Please note we will need to see recent evidence (no more than 3 months old) of the benefit received, proof of household income (3 monthly or 4 weekly most recent consecutive payslips) or the most recent accounts for self-employment. If you are supplying a Tax Credit Award Notice we will need to see the full document including the page showing the household income.

4. Declaration:

I confirm that the details contained in this application are true and accurate.

Student Signature:		Date	
Parent/Carer Signature Adult 1:		Date	
Parent/Carer Signature Adult 2 (if applicable):		Date	

5. Checklist: *

Have you...	✓
Completed all sections of the application form	
Enclosed evidence of living in care (if applicable)	
Enclosed recent evidence of 3 consecutive months/4 consecutive weeks payslips (if applicable)	
Enclosed most recent accounts for Self Employment (if applicable)	
Enclosed recent evidence of benefits (if applicable)	
Enclosed your most recent Tax Credit Award Notice – all pages (if applicable)	