## 16 - 19 Bursary Fund Application Form

## SECTION 1 - Student Details

	The 'eald
community	school

First Names:	Surname and sixth form
Date of Birth:	Age:
Email:	Mobile Telephone Number:
Permanent address:	Post Code:
Have you lived in the UK for the past three years?	If not, where else have you lived? Please give dates.
YES/NO	
Do you completely support yourself financially (including all bills) or live independently? YES/NO	How many siblings under the age of 18 live permanently at the address given above?  0 / 1 / 2 / 3 / 4 / 5+
Are you enrolled at any other school/college? YES/NO	Current year of course: Year 1 / Year 2 / Year 3

SECTION 2 - Student Bank/Building Society Details (for your application to be processed, you <u>must</u> have a bank or building society account in <u>your own name</u>, that will accept BACS payments.

a ballk of building societ	y account in your own name, that will accept bacs payments.
Name of Account Holder:	
Name of Bank:	
Sort Code and account number:	

SECTION 3 - Which bursary are you applying for? (please read the Bursary Fund Information document and tick the relevant box)

Full 16 - 19 Bursary (vulnerable student bursary) - Please complete sections 4, 6, 7, 8 and the declaration	
Discretionary 16 - 19 Bursary - please complete sections Please complete sections 5, 6, 7, 8 and the	
declaration	1

SECTION 4 - Full 16 - 19 Vulnerable Student bursary (the student should tick the box that applies to them)

I am living in care (please provide written confirmation from your social worker, key worker or local authority	
of your current looked after status.)	
I am a care leaver (please provide written confirmation from the local authority that looked after you or	
provided your care services)	
I am in receipt of Income Support or Universal Credit in my own name (evidence is required, and must confirm	
that you can be in further education)	
I am in receipt of Employment Support Allowance AND also in receipt of Personal Independence Payments in	
my own name (a copy of your UC claim confirming which ESA group you've been placed in is required)	

**SECTION 5 - Discretionary 16 - 19 bursary** (the student who is applying for this award should tick the relevant box below)

Priority	I am a student living permanently in a household where the gross annual income is £20,000 or	
group 1	less (excluding benefits).	
Priority	I am a student living permanently in a household where the gross annual income is more than	
group 2	£20,000 but equal to or less than £25,000 (excluding benefits).	
Priority	I am a student living permanently in a household where the gross annual income is more than	
group 3	£25,000 but equal to or less than £27,000 (excluding benefits), and work/child tax credit or	
	Universal Credit is being provided.	
Priority	I am a student who has an extreme financial problem, for example a specific education or	
group 4	independent living cost which cannot be met	

One-off amount required:						
Regular amount required,	and frequency:					
SECTION 6 - Proof of I Your declaration in Secti Where possible, please p	on 4 or 5 must be I			der for your a	pplication to	be processe
Parent/Carer 1 Name:		Paren Name	t/Carer 2			
All documents below m	ust be provided:  Evidence Requ	·			Tick if e	1
					Parent/ Carer 1	Parent/ Carer 2
P60 2021					Curer	Curer 2
Universal Credit	the take home pag	The three most recent Monthly Award notices, clearly showing the take home pay figure, in addition to the amount of Universal Credit after deductions				
Tax Credit	Most up to date Tax Credit Award notice (T602) detailing entitlement to Working Tax Credits or Child Tax Credits					
Child Support Maintenance	Relevant evidence - most recent					
Any other income (eg income from pensions, shares, investments, trusts, dividends etc	Relevant paperwo	ork - dated within th	e last 6 moi	nths		
Any other benefit	Entitlement show	ing evidence of ben- current tax year)	efit receive	d (must be		
SECTION 7 - Househol	Parent/	Parent/Carer	Self (s	student)		
Annual Salary (Before tax)	Carer 1	2 £				
If you or your parent(s)/applicants must provide	• , ,				ch ones they	receive. AL
Total of benefits receiv	ed by the househol	ld each week £				
Please tell us which be						

£

household:

Any other income (including child maintenance)

Please state type of income:

SECTION 8 - Further Information Please give details of any other circumstances that you would like us to know about in support of your application.			
	eclaration and Agreement ease carefully read the Declaration and Agreement below before signing:		
1.	I/We confirm that the statements made on this form are true and, to the best of my/our knowledge and belief, are correct		
2.	I/We undertake to supply any additional information that may be required to support this application and the details given, and understand that if I/we refuse to do so then the application will not be accepted		

- 3. I/We undertake to inform The Weald Sixth Form, in writing, of any changes to my/our circumstances or to the information provided on this form, and understand that this could lead to a change in my bursary award
- 4. I/We agree to repay The Weald Sixth Form in full, and immediately, any monies paid if any of the information I/We have given is found to be either false or misleading. I/We also understand that no further payments would be made if any of the information I/We have given is found to be either false or misleading. I/We also understand that giving false information may result in a referral to the police with the possibility of the student and/or their family facing prosecution.
- 5. I/We understand that any award made is conditional upon the student's excellent attendance (95%), progress, attitude to learning (scores of +2, +1 or 0) and behaviour. Claims may be rejected if the student fails to maintain excellent attendance; regularly fails to meet target grades; has an Attitude to Learning Score of -1 or -2; fails to comply with our Behaviour Policy (displayed on our website) and/or displays any behaviour which falls below the expectations of the College.
- 6. I/We understand that all absences for sickness must be notified by a parent/carer, stating the reason for absence, to either The Weald Absence Line on 01403 787200 or by emailing <a href="mailto:sixthformoffice@theweald.org.uk">sixthformoffice@theweald.org.uk</a>. Students must complete and submit an Absence Request Form, signed by a parent/carer for any absence known about in advance (eg medical appointments, driving tests, university open days). Unauthorised absence or arriving at registration and/or lessons late may result in claims being rejected.
- 7. I/We understand that all monies will be paid direct to the student, who must have a bank account in their own name
- 8. I/we understand that all claims must be made on the Discretionary Bursary Fund Claim Form, and that original receipts must be submitted for the full amount of any payments which are claimed, unless the college is paying for items directly
- 9. I/we understand that the information given on this form may be stored electronically and processed in accordance with Data Protection Legislation
- 10. I/we agree that any award made under either the Full or Discretionary Bursary scheme only covers this academic year, that I/we must apply again next year and that there is no guarantee that funding will be made available for future years

Signed (student):	Date:
Signed (parent/carer 1):	Date:
Signed (parent/carer 2):	Date:

Please return this form to:

FOR COLLEGE USE ONLY



The Weald Sixth Form Station Road Billingshurst West Sussex RH14 9RY

Date Received:	
Assessed by:	
Additional notes:	
Details of Bursary Award, including priority group:	
Vulnerable Student Bursary Awarded?	Yes/No
Discretionary Bursary Awarded?	Yes/No
Authorised by:	
Date of Authorisation:	