

**16-19 BURSARY FUND APPLICATION FORM
2020/2021**



Pupil Details:

Your name:

Mr / Miss

Date of birth

/ /

Your age

Your address

Post Code:

Telephone:

Email
address for
payment
Notification

@

School
Attending

Course /
Form

If A Levels please list :

Do you receive assisted travel support to School? YES / NO

Financial Information

Are you (the young person applying) currently in receipt of Income Support (Universal Credit) or Employment Support Allowance and Disability Living Allowance (or Personal Independence Payments). (if yes please provide proof of both benefits)	Yes / No
Are you currently in receipt of Free School Meals? If you have answered No to both of the above, proof of income will be requested. The qualifying criteria is a household income of £16,190 or below to qualify (Please provide your Tax Credit Award Notification Letter for 2019/20).	Yes / No
Do you have the right of abode in the UK and have you been ordinarily resident for the last three years?	Yes / No

Please provide proof (copy of a bank statement) of your bank details showing your name, address, account number and sort code. Payment cannot be made without this information, when supplied payment will be made directly into your account by BACS transfer.

Account Name:
Account No:
Sort Code:.....

Declaration:

Please read the declaration below carefully before signing:

I declare that the statements made on this form are true and to the best of my knowledge and I believe are correct in every respect. I undertake to supply any additional information that may be required to verify the particulars given. I understand that if I refuse to provide information relevant to my claim the application will not be accepted. I also undertake to inform the school of any alteration to any of the particulars in writing.

I agree to repay the school immediately in full and any sums advanced to me if the information I have given is shown to be false or deliberately misleading. I am aware that the funding covers only this school year and that I must re-apply next year; there is no guarantee that I will receive funding for future years even if I am eligible for the current year.

Where my child is in receipt of Special Educational Needs Transport, I agree that the contribution of £540 pa towards the overall cost of transport is to be deducted from the bursary award prior to payment.

Applicant's Signature:
Parent's Signature:
Date: / /

When complete (enclosing copy of a bank statement) please return to: Post-16 Support Pupil Admissions Floor 5, West Wing Moorfoot Building Sheffield S1 4PL
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For School Use

Please confirm the student named on the front of this application form is studying at your school.

School Stamp.

Signed

Date

Name

School

Any Comments regarding this application: