



## **16-19 Bursary Scheme Application Form**

### **Student details**

Name of student: .....

Tutor Group: .....

Date of Birth: .....

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### **Bursary Level**

Please indicate which level of Bursary you wish to apply for (please tick one option only):

Vulnerable Group Bursary ☐

Discretionary Bursary ☐

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### **Details of Support Required**

Please list the items financial support is required for. If support is required for a bus pass, please provide details of the bus service used and bus stop:

Bus Pass ☐ School trips ☐ Stationery ☐

Laptop ☐ Books ☐ Uniform ☐

Other – please specify:

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### **Is this your first application in this academic year?**

Yes ☐ Please complete Section B

No ☐ Please complete Section A

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### **Section A**

Has the household financial income changed since your last application?

Yes ☐ Please complete Section B

No ☐ Please go straight to Declaration Section

### **Section B**

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Please refer to the guidance before completing this section.

Total family annual income (including any benefits) £.....

Please list the supporting documents you have attached (photocopies rather than original documents are preferred):

**Additional information**

Please provide any other information you wish for the Bursary Committee to consider in support of your application:

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**Declaration Section**

- I certify that the information above is complete and accurate to the best of my knowledge and I understand that giving false or incomplete information, that leads to incorrect payments/support or overpayments, may result in future support being stopped and any incorrectly paid funds recovered and police prosecution,
- I confirm that I will inform the school of any change in circumstances or change in family income,
- I am aware that Bursary financial support may be stopped due to poor attendance/behaviour or failure to follow the school rules,
- I am aware that funding can only be provided subject to the school receiving sufficient government funding.

**Signed (student)** ..... **Date** .....

**Signed (parent/carer)** ..... **Date** .....

**Return to the Finance Office.**

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