

**APPENDIX A**  
**16-19 BURSARY FUND APPLICATION FORM 21/22**  
**Major Awards**

**1 Student Details**

Surname / Family name	
First name(s)	
Sex (M / F)	
Date of Birth (dd/mm/yyyy)	
Age on 31 <sup>st</sup> August 2021	
You must be aged 16, 17, or 18 on 31 <sup>st</sup> August 2021 to apply.	

**2 Address Details**

Home Address	
Postcode	
Home telephone number	
Mobile telephone number	
E-mail address	

**3 School /College /Provider Details**

Name of current institution	South Hunsley School & Sixth Form College
-----------------------------	---

**4 Course Details**

Full time	
-----------	--

**5 Personal Circumstances**

Are you or have you been in the LA care system for 13 weeks or more since you were 14?	Yes / No
--	----------

Are you in receipt of Income Support	Yes / No
--------------------------------------	----------

Do you consider yourself disabled and in receipt of Employment Support Allowance and Disability Living Allowance	Yes / No
--	----------

Are you or have you been in receipt of free school meals within the last year?	Yes / No
--	----------

**6. Household Members.**

**Please include all persons who live in the household, including siblings**

	<b>Student</b>	<b>Other household member</b>	<b>Other household member</b>	<b>Other household member</b>
Surname				
First name(s)				
Relationship to Learner				

**7. Financial Assessment – Income**

*To be completed by the person(s) responsible for the household bills*

Student	Are you employed? (Yes / No)	If yes, please submit 20/21 P60 for details
Other household member	Are you employed? (Yes / No)	If yes, please submit 20/21 P60 for details
Other household member	Are you employed? (Yes / No)	If yes, please submit 20/21 P60 for details
Other household member	Are you employed? (Yes / No)	If yes, please submit 20/21 P60 for details

*If you are not employed please tick the relevant boxes to indicate the benefit(s) you receive.*

<b>Benefit received</b>	Student	Other household members	Other household members	Other household members
Universal Credit				
Disability Living Allowance				
Incapacity Benefit				
Carer's Allowance				
Council Tax Benefit				

**8 Financial Assessment – Other Income**

*Please tick the relevant boxes to indicate all other income received into the household*

<b>Other Income</b>	Universal Credit	Child Benefit	Grants or Bursaries etc	Any other income / benefit – please specify
Student				
Other household members				
Other household members				
Other household members				

**9 Evidence**

**Whatever you have declared in question 5 above must be backed up by evidence (photocopies accepted) in order for an assessment to be made.**

The tables below show the evidence you will need to provide with your application form.

Once you have declared and identified your benefits on the application find the 'Type of Income' that applies to you in the first column and the 'Evidence Required' column will tell you what you need to provide.

<b>Type of Income</b>	<b>Evidence Required</b>	<b>Evidence Received (Tick)</b>	<b>Amount</b>
<b>Annual Salary</b>	P60 for tax year 2020-21, or week 52 (last week in March 2021) payslip or month 12 (March 2021 payslip)		
<b>Universal Credit</b>	Entitlement / Award Notice letter – dated within the last 3 months		
<b>Incapacity Benefit</b>	Entitlement / Award letter – dated within the last 3 months		
<b>Carer's Allowance</b>	Entitlement / Award letter – dated within the last 3 months		
<b>Any other benefit</b>	Entitlement / Award letter – dated within the last 3 months		
<b>Child Benefit</b>	Award letter or copy of bank statement showing payment		
<b>Grants or bursaries etc</b>	Relevant paperwork detailing entitlement and amount paid		
<b>Any other income</b>	Relevant paperwork		

**4     Declaration**

*Please read the declaration below and read carefully before signing:*

- 1** I declare that the statements made on this form are true and to the best of my knowledge and 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 South Hunsley School & Sixth Form College of any alteration to any of the particulars in writing. I agree to repay South Hunsley School & Sixth Form College in full and immediately any sums advanced to me if the information I have given is shown to be false or deliberately misleading.
  
- 2** It has been explained to me that evidence of my status as a young person in care or care leaver and / or that I have had access to free school meals is required. The school / college / training provider have told me that they will need to seek confirmation from the Local Authority in which I am resident or assigned to, and to do this my application form will be sent to that Local Authority. Confirmation of the details included within this financial assessment will be required in writing from that Local Authority, (email communication is acceptable). I consent to this information being shared with the Local Authority for this purpose and I understand that this information will be managed in a confidential manner and used only for the purposes of this assessment.
  
- 3** I am aware that the funding covers only this academic 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.

Signed (Student) ..... Date .....

Print Name .....

Signed (Person 1 or 2) ..... Date .....

Signed South Hunsley School .....

Date: .....