16-19 Discretionary Bursary Application 2023-2024

Prior to completing this form please read ‘16-19 Management Statement’. Proof of entitlement must be included when the form is returned to Miss Harpham.

Personal Information

Student Details

|  |  |
| --- | --- |
| Surname |  |
| First Names |  |
| Date of Birth |  |
| Address |  |
|  |
|  |
|  |
| Post Code |  |
| e-mail address |  |
| Mobile Phone |  |
| Home Phone |  |

Parent/Carer Details

|  |  |
| --- | --- |
| Surname |  |
| First Names |  |
| Address if different from above. |  |
|  |
|  |
|  |
| Post Code |  |
| Mobile Phone |  |
| Home Phone |  |
| National Insurance Number |  |
| Household Income (Please supply the  required evidence to support this claim as detailed in the bursary statement) |  |

We confirm that the details provided to support this application for the 16-19 Bursary are true and accurate. We accept that if the student named above has any unauthorised absences or there are concerns regarding progress and/or behaviour raised against them during the academic year funding may be reduced or removed. We understand that any and all changes in financial circumstance must be immediately reported to the Bursary Administrator to ensure funding remains at the correct level.

|  |  |  |  |
| --- | --- | --- | --- |
| Students Signature |  | Date |  |
| Parent/Carer Signature |  | Date |  |

Discretionary Bursary Fund Allocation Details

We (Parents/carers and student) have read the ‘16-19 Bursary Management Statement’ that explains the funding that may be available and the consequences of not informing the Bursary Administrator in writing of changes in circumstance. Please tick the box if this statement is true.

Please indicate the reason you are applying for the Discretionary 16-19 Bursary. Please tick all that apply

|  |  |
| --- | --- |
| Discretionary Bursary Criteria | |
| My gross household income is <£30,000 and there is an identifiable financial need. |  |
| I am in receipt of Free School Meals |  |
| My household is in receipt of means tested benefits |  |

The following are acceptable as evidence of your need. Please tick the evidence you are providing.

|  |  |
| --- | --- |
| Discretionary Bursary Evidence | |
| Certified letter from Her Majesty’s Revenue and Customs regarding benefits or household income (must be in date) |  |
| Certified letter from the Local Authority regarding benefits or Free School Meals |  |
| Certified letter from the Department of Work and Pensions |  |
| P60 and other evidence of financial need |  |
| Self-Employment Income evidence and other evidence of financial need |  |
| Details of other means tested benefit evidence: | |

If you have further evidence of a financial need you should provide it with this application.

|  |
| --- |
| Description of further evidence provided: |

Discretionary Bursary applicants need to provide details of the support they need. The amount paid will depend on the Bursary Band awarded and the student’s personal allowance.

|  |  |  |  |
| --- | --- | --- | --- |
| Discretionary Bursary Allowance | | | |
| A | B | C | D |
| 100% | 80% | 60% | 40% |

Post 16 School Transport

Where possible you should apply through the Lincoln County Council web site or by calling 01522 782020. Please provide a copy of the correspondence from the LCC detailing your reference number and how to pay. Tick box if copy attached  Tick box if awaiting correspondence

|  |  |
| --- | --- |
| If you cannot obtain transport through the Lincoln County Council web site. Please provide details of the assistance you are asking for and why. | |
| Travelling From: |  |
| Transportation details: |  |
| Cost information and where found (web site, etc.) |  |

Trips and Visits

Please provide details of any known trips or visits associated with your course/s. Your teacher should be able to assist you. Please note if any refunds are required/available it will be refunded to the 16-19 Bursary.

|  |  |  |
| --- | --- | --- |
| Trip name | Cost (if known) | Term planned |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

Equipment required on loan

Please provide information on items you wish to loan from the school. The cost of these items will not be deducted from your personal allowance.

|  |  |  |
| --- | --- | --- |
| Item Description | Course Required For | Teacher |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

Personal equipment required

Please provide information on items that you need that will not be returned to school (i.e. Text books that you wish to make notes in, etc.)

|  |  |  |
| --- | --- | --- |
| Item Description | Course Required For | Teacher |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

Clothing

Please refer to the 16-19 Bursary Management Statement regarding the allowances available for clothing. Please provide details of clothing assistance that you may require.

|  |
| --- |
|  |

Please note that if this application is successful payments will be made directly to the student via BACS (bank transfer). The student will need a suitable bank account in their own name.

16-19 Bursary Administrator Provision Details – Bursary Administrator Only

|  |  |  |  |
| --- | --- | --- | --- |
| Date application received |  | Approved Y or N |  |
| Bursary Band allocated |  | Allocation up to £ |  |

If further evidence required details as to when requested, etc.

|  |
| --- |
|  |

If not approved details as to why not

|  |
| --- |
|  |

Bursary Expected Provision Details

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Description | Term 1 | Term 2 | Term 3 | Term 4 | Term 5 | Term 6 |
| Consumables allowance |  |  |  |  |  |  |
| Food allowance |  |  |  |  |  |  |
| Transport costs |  |  |  |  |  |  |
| Personal equipment |  |  |  |  |  |  |
| Trips and visits |  |  |  |  |  |  |
| Clothing |  |  |  |  |  |  |
| Totals |  |  |  |  |  |  |
| TOTAL ALLOCATION | | | | | |  |