

16-19 Bursary Fund Application Form



West Street, Comberton,
Cambridge CB23 7DU
(01223) 262503

sixthform@combertonvc.org

Please complete each section listed below

- Section 1. Details of applicant
- Section 2. Details of Provider and Course
- Section 3. Eligibility Priority
- Section 4. How the funds will be used
- Section 5. (To be completed by your Post 16 Provider)
- Section 6. Declaration by applicant

PLEASE COMPLETE THIS FORM USING BLOCK CAPITALS

Section 1: Details of applicant	Male <input type="checkbox"/>	Female <input type="checkbox"/>
Full Name:		
Date of Birth:		
Home address:.....		
.....Post Code:		
Tel:..... Email:		

Section 2: Details of Provider and Course
Name of Post 16 Provider: Comberton Sixth Form
Address of Post 16 Provider: West Street, Comberton, Cambs, Post Code: CB23 7DU
Details of Programme of study being followed: Which BTEC or A level courses are being studied?

Section 3: Eligibility Priority
This section will ask you to indicate under which of the 4 agreed categories you wish your application to be considered against. You will also find information about what evidence you will be required to supply to support your application.
Please indicate with a cross in the box next to the description of the category under which you wish your application to be considered against, and to confirm that you have provided the evidence required. (Please only put a cross next to one priority).
<p>Category 1:</p> <div style="display: flex; align-items: flex-start;"> <div style="border: 1px solid black; width: 40px; height: 40px; margin-right: 10px;"></div> <div> <p>I wish my application to be considered under Priority One; ‘Young people in care, care leavers, young people in receipt of income support and disabled young people in receipt of Employment Support Allowance who are also in receipt of Disability Living Allowance’.</p> </div> </div> <p>In support of my application I enclose either:</p> <ol style="list-style-type: none"> a) Written confirmation of my current, or previous, looked-after status from the Local Authority who looked after me, or who provided my leaving care services; or b) A letter confirming that I am in receipt of Income Support or Employment Support Allowance and Disability Living Allowance.

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Category 2:

I wish my application to be considered under Priority Two;
'Young people who are claiming, or who are eligible to receive, a Free School Meals'

To check your entitlement to Free School Meals, please use the link below to contact the county team responsible:

<http://www.cambridgeshire.gov.uk/freeschoolmeals>

They will then test your eligibility for Free School meals and inform the college of the outcome. If you are found to be eligible then a bursary under this category will be awarded.

Category 3:

I wish my application to be considered under Priority Three: 'Young People whose **household** income is below £27,000 per annum'.

You must provide evidence of your **total annual household income** and tick the box(es) of all the relevant documentation that you are providing to support this, including details of benefits being received.

P60 for all earners in the household

Universal Credit letter, including total household income figure

Self-employed earnings (official tax return)

Other benefits/Pension award letter

Wage slips (3 most recent, for each earner)

If you do not provide evidence to support the total household income figure, then we cannot process your application for discretionary bursary payments.

Category 4:

I wish my application to be considered under Priority Four:
'Young people who have been affected by a sudden, exceptional change in financial circumstances.'

I have enclosed a detailed statement in support of my application.

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Section 4: How the funds will be used:

Please provide below details of how the bursary funds, if awarded to you, will be used, and the amount.

Please note that those students making an application under Priority 2 will not normally be eligible to claim funding for meals or transport as they should be entitled to receive a free school meal at the provider, and to assistance with transport costs in line with the County Council's Post – 16 Transport Policy.

The bursary will be paid direct to your bank account on a half termly basis subject to the attendance and behaviour standards we set.

<u>Category</u>	<u>Amount (£)</u>
Books/equipment/specialist clothing related to the course you are following: you will need to provide receipts/order form to show the cost of items	
Additional course costs, for example, education trips/visits:	
Transport: for bus costs please indicate if the pass is costed per term or per year and give the number of the bus used	
Meals: indicate amount per day needed, unless Free School Meals are provided	
Other items solely related to the course you are following – please provide details: you will need to provide receipts/order form to show cost of items	

In order for us to pay the bursary into bank accounts please provide the students bank details

Please note we are unable to make payments into post office accounts

Account Holders Name:

Bank/Building Society:

8 Digit Account Number:

Roll Number if applicable:

Sort Code:



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Section 5:

Statement by Comberton Sixth Form

I confirm that this applicant meets the residency and eligibility criteria under which a bursary may be paid.

I confirm that this applicant is enrolled on a programme of study under which a bursary may be awarded.

I confirm that where this application is to be considered under Priority Four, that I am aware of the sudden exceptional change of financial circumstances, and that I support this application under this Priority.

I confirm that the expenditure detailed in Section 4 is relevant and appropriate for the programme of study being followed by the applicant.

Signed:

School Stamp

Name: Irayna Owen

Position: Deputy Head of Sixth Form

Date:

Section 6: Declaration by Applicant:

I confirm that the information I have provided in this application is correct to the best of my knowledge, and that I understand that I must notify Comberton Sixth Form of any change of circumstance which may affect my entitlement to a bursary payment.

I understand that if I leave before the completion of my programme of study or my attendance drops below 90%, that I may be required to repay all or part of the amount paid to me under the 16-19 Bursary Fund.

I will notify the Welfare Benefits Service of any changes to my financial circumstances that may affect my entitlement to the Bursary Fund.

The data provided will be held in the strictest of confidence and in accordance with our Data Information Policy. The college is registered as a Data User under the Data Protection Act 2018 and will only use this information for recognised Educational Purposes.

Signed:

Date: