



16-19 BURSARY FUND APPROVAL FORM

STRICTLY CONFIDENTIAL

Please complete the form in BLOCK CAPITALS and in black ink.

Section 1 – Student Details

First Name:	Surname:
Date of Birth:	Year 12 / 13

Type of Award Applied For:	Sections to Complete	<input checked="" type="checkbox"/> (where appropriate)
Mandatory Bursary Fund Payment	Section 2 and 5	
Discretionary Bursary Fund Payment	Section 3 and 5	
Additional Financial Support	Section 4 and 5	

Section 2 - Mandatory Bursary Fund Payment (£1,200 per academic year)

Please tick (✓) the box that applies to you:

<input type="checkbox"/>	I am living in care
<input type="checkbox"/>	I am a care leaver
<input type="checkbox"/>	I am in receipt of income support
<input type="checkbox"/>	I am in receipt of Employment Support Allowance and also in receipt of Disability Living Allowance

Now go to **Section 5** of this form

Section 3 - Discretionary Bursary Fund Payment

Please tick (✓) the box if this applies to you:

<input type="checkbox"/>	I am a student who is eligible for Free School Meals
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Now go to **Section 5** of this form

Section 4 - Additional Financial Support

Details of the additional financial support applied for and the values (£):

Details of Expenditure (please refer to 16-19 Bursary Policy)	Amount (£)

Continue overleaf

Please give details below of any the exceptional circumstances which are relevant to this claim:

Section 5 - Declaration

I certify that the information I have provided is correct to the best of my knowledge. I undertake to provide any proof of purchase(s) which may be requested.

Signature of Parent or Carer:

Signed:.....

Date.....

Print Name:.....

Signature of Student:

Signed:.....

Date.....

Print Name:.....

Please return once signed and completed to the Pastoral Office, A Floor.

Office Use Only		
Pastoral Office Approval	Amount Awarded:	Signature:
Finance Office:	Processed by:	Date:
	Date:	Authorised by: (Federation Business Manager) Date:

or

Pastoral Office Rejected Claim	Reason for Rejection:	Signature:
		Date: