

**Queen Elizabeth High School**

**16-19 Bursary Scheme Application Form 2024/25**

**Please complete this form and return it to the sixth form pastoral team with copies of supporting evidence for household income, and any receipts for expenditure. All information can be scanned and emailed to ebrown@qehs.net**

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| **Student Details** | | | | | | | | | | |
| Title: |  | First name: |  | | | | Surname: | |  | |
| Date of birth: |  | | Age at 31/8/24: | | | |  | | | |
| Address: |  | | | | | | | | | |
| Postcode: |  | Telephone: | |  | | Email: | |  | | |
| Have you the right of abode and been resident in the UK for the last 3 years? | | | | | | | | Yes | | No |
| Subjects being studied in the sixth form in 2024/25 (please list): | | | | | | | | | | |
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| **Bursary Criteria** |
| To qualify you must be aged 16, 17 or 18 on 31 August 2024 and meet the ESFA’s residency criteria. The bursary is paid to enable you to attend education. |

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| **Vulnerable Bursary Criteria** | | |
| To qualify, you (the student) must fall into one of the below categories and produce the required evidence as stated. | | |
| Are you in receipt of Income Support or Universal Credit because you are financially supporting yourself? (Evidence required – Income Support or Universal Credit award letter). | Yes | No |
| Are you a care leaver or currently looked after in care? (Evidence required - letter from local authority). | Yes | No |
| Are you in receipt of Disability Living Allowance or Personal Independence Payments in your own right **as well as** Employment and Support Allowance or Universal Credit in your own right? (Evidence required – Income Support or Universal Credit award letter **and** evidence of DLA/PIP). | Yes | No |

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| **Discretionary Bursary Criteria** The person responsible for household bills should complete this section. | | | | | | |
| Your household income is one of the criteria which will help us to assess your application. | | | | | | |
| Please tick to indicate what type of evidence you have provided for the household members and ensure it is dated  within the last three months where applicable. If you cannot provide evidence then we cannot process your application for bursary payments. | | | | | | |
| **If you or your siblings are in receipt of Free School Meals you do not need to provide further financial information in the section below – please proceed to Free School Meal Section.** | | | | | | |
| Income Support/Universal Credit award letter |  | Working/Child Tax Credit – Full award notice for full year along with supporting evidence of earnings if applicable | |  | Self-employed earnings (official tax return) |  |
| Housing Benefit |  | Carer’s Allowance | |  | Child Benefit (award letter) |  |
| P60 for tax year 2023/24 or Wage slips for household (month 12 or week 52 – March 2024) |  | Disability Living Allowance or Personal Independence Payments | |  | Any other benefits or income/pension – please specify…………………………..  ………………………………….. |  |
| Please list the names of the household members and their relationship to the student: | | | | | | |
| Name | | | Relationship to student | | | |

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| **Free School Meals** |
| Are you or your sibling(s) in receipt of free school meals? Yes No |
| Name(s) of sibling(s) |

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| **Please complete this section outlining your personal circumstances leading to**  **this financial need** (Required) |
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| **Transport to and from school** see also NCC’s Post-16 transport policy on their website for further details. |
| Do you use school transport or public transport to get to and from school? Yes No |
| If you answered Yes to the question above, please select the correct option below: |
| I am entitled to free transport from NCC and have paid a £50 administration charge to apply for this. |
| I am entitled to free transport from NCC but did not have to pay the £50 administration charge to apply for this. |
| I have a place on NCC transport for which I pay £360 per year. |
| I use public transport which costs £ per week/month/term/year (delete as appropriate). |

**Please provide copies of receipts for any expenditure already incurred.**

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| **Financial support required** | | |
|  | Tick if required | Expected amount (if known), £ |
| Transport (excluding school transport in the section above) |  |  |
| Books |  |  |
| Equipment |  |  |
| Trips |  |  |
| Meals |  |  |
| Travel to university interviews |  |  |
| Other (please state) |  |  |
| **TOTAL** | |  |

**Please provide copies of receipts for any expenditure already incurred, including any transport costs.**

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| **Bank details** |

Please be aware that we plan to pay the majority of discretionary bursary awards ‘in kind’ e.g. by purchasing any equipment required or paying for trips. Vulnerable bursary payments will be paid directly into students’ bank accounts, as will any amounts authorised that have already spent (receipts required). Please provide your bank details below, as printed on your bank card or statement.

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| Account Holder’s Name as it appears on bank statement: |  |
| Bank Name and Branch: |  |
| Account number: | Sort code: |

**Please read and sign the declaration overleaf**

**DECLARATION**

* I have read and understand the 16-19 Bursary Policy and other information provided.
* I have made this claim for bursary, fully aware that any false statements can lead to withdrawal/refusal of any financial support and may leave me open to prosecution.
* I understand that if I refuse to provide information which may be relevant to my claim, the application will not be accepted.
* I understand that monies I receive under the Bursary Scheme will be paid on condition of standards of attendance and behaviour.
* When financial changes to my household occur, which may result in changes to my claim, I will notify the school immediately.
* I understand that any bursary monies I receive under the scheme are awarded to provide me with financial support to allow me to continue in education, and if I leave education all financial support will stop.
* I understand that I do not have an automatic entitlement to Bursary payments, and all payments are based on the information I have provided.
* Any equipment provided will remain the property of the school and I will return it in good condition at the end of the course.
* I understand I have the right to appeal if I disagree with the outcome of my Bursary Application. This appeal should be made to the Chief Financial Officer at the school.
* I am aware that the funding covers only this school year and that I must re-apply next year.

**I declare that the information on this form is true and accurate to the best of my knowledge.**

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| Signed (student) |  | Signed (student) Signed (parent/carer) | | |
|  |  |  | | |
| Student name |  | Signed (student) Parent/carer name | | |
|  |  |  | | |
| **School assessment of application** (for school use only) | | | | | | |
| Age criteria checked | | | | Residency criteria checked | | |
| Eligible education provision | | | | Evidence of eligibility retained | | |
| * Documentation reviewed (type and date) | | | |  | | |
| * Annual household income | | | | £ | | |
| Attendance record for preceding half term | | | |  | | |
| Bursary type | | | | Vulnerable/Discretionary (delete as required) | | |
| Proposed amount of award | | | | £ | TOTAL AWARD | |
|  | | | | **Date** | **Signed** | |
| Checks completed by | | | |  |  | |
| Pastoral approval | | | |  |  | |
| CFO sign off | | | |  |  | |
| Award/rejection letter issued | | | |  |  | |