



For Office use only:

16-19 Bursary Fund Application Form 2024/25

- Before you complete this application form please read the guidance notes carefully.
- Please complete the application form using **BLOCK** capitals in black pen.
- Please ensure the application is complete with all relevant, original supporting evidence. All supporting evidence must be the original documentation; photocopies are not acceptable.

Section A – To be completed by all student applicants

1.1 Student's Personal Details

First Name _____	
Surname _____	
Date of birth _____	Age on 31 August 2024 _____
Are you: Male <input type="checkbox"/>	Female <input type="checkbox"/>
Address _____	

Home Tel No _____	Mobile Number _____
Email address _____	

Do you have any long standing illness or disability? Yes No

(Long standing means anything that has troubled you over a period of time or that is likely to affect you - over a period of time)

If yes, does this illness or disability limit your activities in any way? Yes No

1.2 Course Details

Which subjects are you studying?

1.3 How do you intend to spend your Bursary?

Please indicate in the table below what costs you need the bursary to provide assistance with

Expense	Details	Estimated cost
Books		
Equipment		
Fees, exam resits		
Transport costs		
Emergency accommodation and meals		
Course trips		
Interviews and open days		
Other costs (<i>please specify</i>)		

1.4 Student's Bank or Building Society Details

Payments will be made directly into **your** bank account; payments may not be made to anyone else.

Name of Bank or Building Society:	
Branch address:	
Account in the name of:	
Account number <i>(usually 8 digits)</i>	
Sort code <i>(six digits)</i>	

Section B – To be completed by all student applicants

2. Which Bursary are you applying for?

Please complete either Part 1 or 2 below. Students aged under 19 on 31/08/24 and who fall into one of the following categories may be eligible for a Bursary. Please refer to the Guidance Notes and tick as appropriate.

Part 1: Vulnerable Bursary		
Eligible groups for this bursary:	Tick	Supporting evidence required
Young person in care or care leaver	<input type="checkbox"/>	Please attach supporting letter from your key worker or social worker
Young person in receipt of Income Support or Universal Credit	<input type="checkbox"/>	Please attach benefits paperwork dated within the last six weeks.
Young person in receipt of Disability Living Allowance and either Employment Support Allowance or Universal Credit	<input type="checkbox"/>	Please attach benefits paperwork dated within the last six weeks.
Young person in receipt of Personal Independence Payment (PIP) and either ESA or Universal Credit	<input type="checkbox"/>	Please attach benefits paperwork dated within the last six weeks.

If you have difficulty producing the evidence required for your application, please speak with Mrs Pelling and we may be able to help.

Part 2: Discretionary Bursary		
Eligible group for this Bursary:	Tick	Evidence to provide and what to do next
• Living in a household with a total annual income below £32,000 before tax and national insurance.	<input type="checkbox"/>	A parent or carer in your household must complete the financial assessment in section 4, and attach any evidence listed within the assessment. Once the form has been completed and all evidence has been attached take it to Mrs Yankah in the Sixth Form Admissions Office. The original paperwork will be photocopied and immediately returned to you.

3. Student Declaration

Your application will not be assessed unless you sign and date this declaration.

- I declare that all information given on this form is correct to the best of my knowledge.
- I undertake to supply any additional information that may be required to verify the information given. I understand that if I refuse to provide information relevant to my claim the application will not be accepted.
- I undertake to inform Archbishop Tenison's School in writing of any changes in the information given relating to my circumstances.
- I agree to abide by the terms of my Learner Agreement.
- I agree to repay in full and immediately any money paid to me if the information I have given is shown to be false or deliberately misleading.
- I am aware that any funding covers only the school year 2024/25.

Signed: _____ Date: _____

Full Name (in block capitals): _____

(Discretionary Bursary only)

Does the Student qualify for Free School Meals? Yes No

If you have ticked 'Yes' to the above question, please go to Part 5 and sign the Parent/Carer Declaration.

4. Financial Assessment

	Parent/Carer 1	Parent/Carer 2
Surname		
First Name (s)		
Relationship to Learner		
Telephone Number		
National Insurance Number		

In order to be eligible for the discretionary bursary you must declare that the learner is living in a household **with a total annual income below £32,000 before tax and national insurance.**

Declaration of Parent's or Carer's Income					
	Parent/Carer 1		Parent/Carer 2		Evidence to be attached to the completed application form
	Yes	No	Yes	No	
Are you employed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	If yes please provide the last three months worth of payslips or your P60 for tax year 2023-2024.
If yes, please state your current annual income before tax and national insurance	£		£		
Are you self-employed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	If yes – SA302 form or certified accounts.
If yes, please state your current annual income before tax and national insurance	£		£		

Do you receive any of the following grants or benefits?

Declaration of Parent's or Carer's Income					
	Parent/Carer 1		Parent/Carer 2		Original evidence to be attached to the completed application form, which will photocopied and returned immediately
	Yes	No	Yes	No	
Carer's Allowance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Most recent entitlement / award letter
Child Benefit	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Most recent award letter
Child Tax Credit	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Child Tax Credit Award Notice marked "2024-2025" It must be for full year and not partial awards (Full Award Notice)
Council Tax Benefit	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Most recent entitlement / award letter
Employment Support Allowance (ESA)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Most recent entitlement / award letter
Grants or bursaries	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Relevant paperwork detailing entitlement and amount paid
Housing Benefit	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Most recent entitlement / award letter
Incapacity Benefit	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Most recent entitlement / award letter
Income Support	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Most recent entitlement / award letter
Job Seekers Allowance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Most recent entitlement / award letter
Pension	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Relevant paperwork that includes details on the pension income received
Personal Independence Payment (PIP)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Most recent entitlement / award letter
Universal Credit	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Most recent entitlement / award letter
Working Tax Credit	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Working Tax Credit Award Notice marked "2024-2025". It must be for full year and not partial awards (Full Award Notice)
Do you receive any other benefits?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Most recent entitlement / award letter
Do you receive any other income?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Relevant paperwork that includes details on the income received.

5. Parent or Carer Declaration (to be completed by the Parent or Carer who has completed the Financial Assessment at 4.)

The student's application will not be assessed unless you sign and date this declaration.

- I declare that all information given on this form is to the best of my knowledge correct in every respect and I undertake to inform the school of any changes in the information given concerning my circumstances.

Archbishop Tenison's is under a duty to protect the public funds it administers and to this end may use the information you have provided on this form within this school for the prevention and detection of fraud. It may also share this information with other bodies administering public funds solely for these purposes. If you knowingly provide misleading or false information you may be liable to prosecution.

Signed: _____ **Date:** _____

Full name (in block capitals): _____

Fair Processing Notice – GDPR

Archbishop Tenison's CE High School will be what is known as the 'controller' of the personal data provided by you on this form. Our address is Selborne Road, Croydon CR0 5JQ.

We need this data in order to process your application for a Bursary. We do not collect any data or information that we do not need for the purposes of assessing your eligibility for a Bursary. This data will be held by us and used only by our own staff. We will not pass this on to any third party. Please be aware, however, that this information may be stored on a cloud-based system linked to our own servers. We will generally keep your data for a maximum of 6 years, after which time it will be destroyed.

Archbishop Tenison's C of E High School

SIXTH FORM BURSARY CONTRACT 2024-25

STUDENT NAME: _____
(PLEASE PRINT)

TUTOR GROUP: _____

If your bursary application is approved, you will be paid as outlined in the guidance notes which should be read in conjunction with this application form. In order for you to receive this bursary you need to meet the attendance and behaviour policies as detailed on the school website. In addition, the following conditions apply:

- you will attend a minimum of 96% of lessons as detailed on your timetable across the full month. Any payment may be stopped if attendance falls below the required minimum.
- you will be punctual to all sessions and register your attendance
- you will follow the school's absence procedure
- you will meet all action points as set by your subject teachers
- you will meet all deadlines as set by your subject teachers
- you will attend any examinations you are entered for
- you agree to the conditions for receipt of a bursary
- you are aware that any funding covers only the school year 2024/25.

I have read this information and understand the content. I confirm that the details on this application form are true and accurate. If my circumstances change, I will inform the school immediately and understand that this may affect future payments.

Student

Signature _____

Print Name _____ Date _____

Parent/Carer

Signature _____

Print Name _____ Date _____

**Assessment and Approval
2024/25
FOR OFFICE USE ONLY**

Student name:	D.O.B:
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Eligibility – please tick appropriate box (☐)

Vulnerable Bursary	<input type="checkbox"/>	<ul style="list-style-type: none"> Those young people who receive Income Support / Universal Credit Care Leavers or young people who are looked after children Disabled young people in receipt of both Employment Support Allowance and Disability Living Allowance / PIP
Discretionary Bursary	<input type="checkbox"/>	<ul style="list-style-type: none"> Young people facing financial barriers to participation in further education. Agreed standards of behaviour and attendance should be met
Free Meals	<input type="checkbox"/>	<ul style="list-style-type: none"> Young people who qualify for free school meals under the Guidance Rules and whose household is in receipt of one of the benefits criteria listed

Evidence provided checked by: _____ **Date:** _____

Assistance Requested	Assistance Granted
Travel - We will purchase 16+ Oyster Card. Other expenses need to be agreed by SLT	
Meals: Breakfast <input type="checkbox"/> (and/or) Lunch <input type="checkbox"/> Must be purchased from the school Canteen.	
Appropriate Clothing	
Equipment - No computers or laptops to be purchased for individual students.	
Study Support - Tutors	
Trips - including University visits	
Any other	
NOTE - Must fall within guide amounts	

Signed: _____ Date: _____

Name: _____ Position: _____