

# 16-19 BURSARY FUND APPLICATION FORM

## 2021-22 ACADEMIC YEAR

### PROTECTION OF PUBLIC FUNDS

We must protect the public funds we handle and so we may use the information you have provided on this form to prevent and detect fraud. We may also share this information, for the same purposes, with other organisations that handle public funds, and with this in mind, a sample of applications will be chosen at random for full investigation.

### DATA PROTECTION

The data controller is School Data Protection Officer - schoolDPO@warwickshire.gov.uk - The data you provide to Student Finance will be used to assess and facilitate your entitlement to help from Schools Sixth Form Learner Support Fund. Cardinal Newman Catholic School, in fulfilling its data protection obligations will treat all personal data, held manually and on a computerised Learner Support Fund database with due care, and will only disclose data in accordance with the Data Protection

### SECTION A: PERSONAL DETAILS

Surname/Family Name

First Name(s)

Date of Birth

Present Home Address

*(If your address changes please notify us)*

Telephone Number

Email Address

### SECTION B: COURSE DETAILS

Name of School

Course Name and Description

Which year will you be in?

12

13

Extra Year

### SECTION C: LEARNER'S CIRCUMSTANCES

Who do you live with? **Please tick all that apply**

<input type="checkbox"/> Mother	<input type="checkbox"/> Father	<input type="checkbox"/> Parent's Spouse/Partner	<input type="checkbox"/> Grandparent(s)
<input type="checkbox"/> Foster Parents	<input type="checkbox"/> On My Own	<input type="checkbox"/> In Care/ Looked After	<input type="checkbox"/> Other, please explain
<input type="checkbox"/>			

Have you always lived in the UK and you are a British Citizen

Yes

No

If **YES** proceed to **Section D**.

If **NO** please complete the **separate residency** information sheet before proceeding to Section D.

SCHOOLS SIXTH FORM Bursary FUND. **RESIDENCY INFORMATION**

2021/2022 ACADEMIC YEAR

**This form must be completed when learners indicate on the application form that they have not al-**

**PROTECTION OF PUBLIC FUNDS**

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**DATA PROTECTION**

The data controller is Coventry City Council. The data you provide to Student Finance will be used to assess and facilitate your entitlement to help from

Surname/Family name

First name(s)

When did you enter the UK?

Where did you live before you came to the UK?

Why did you come to the UK?

Refugee status

Indefinite leave to remain

Leave to remain until \_\_\_\_\_

Asylum seeker?

European Economic Area Migrant Worker  
What is your current status (or that of your parents) in the UK?

**Please provide copies of  
your passport and any  
Home Office papers.**

**DECLARATION BY LEARNER**

- **The information I have given on this form is accurate.**
- **I will inform you immediately of any change in either my own or my family's personal circumstances as they occur.**
- **I understand that if I provide false or incomplete information I will have to repay any money given to me to help me study**

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

SECTION D: LEARNER/STUDENT INCOME

Part Time Job

£

weekly

Benefits

£

weekly

Other

£

weekly

SECTION E: SUPPORT REQUIRED

I am applying for the 16 - 19 Bursary because I need help with the following:

- Books /Equipment
- Travel
- Examination/Registration Fees
- Field Trips
- Other \_\_\_\_\_

**Please provide details of the support required and likely costs below:-**

*I am aware that I will be required to provide receipts for any payment I receive.*

SECTION F: PLEASE TICK BELOW **ALL THOSE** THAT APPLY

- |                          |  |  |
|--------------------------|--|--|
| <input type="checkbox"/> | A - I am in receipt of free school meals.  | <b>We will need a letter from the School Benefits department</b>   |
| <input type="checkbox"/> | B - I am or my family are in receipt of Asylum Seeker Funding from the home Office.              | <b>Please provide proof e.g. Home Office letter</b>  |
| <input type="checkbox"/> | C - I am or my family are in receipt of Income Support/ Universal credit or Jobseekers Allowance | <b>Please provide proof e.g. Benefit letter plus 3 recent bank Statements.</b>   |
| <input type="checkbox"/> | D - I am a looked after child.   | <b>Please provide a letter from your Social Worker.</b>  |
| <input type="checkbox"/> | E - <b>Family's gross taxable income is less than £20,000 a year.</b>                            | <b>Please provide a copy of the 2021/22 Tax Credit Award notice and evidence of your combined income such as 3 monthly pay slips or 6 weekly ones.</b> |
| <input type="checkbox"/> | F - I am a care leaver.  | <b>Please provide a letter from your Social Worker.</b>  |
| <input type="checkbox"/> | G - I am disabled and in receipt of Employment Support Allowance and Disability                  | <b>Please provide proof e.g. Benefit letter plus bank Statement.</b>   |

**SECTION G: HOUSEHOLD INCOME**

You will be asked to provide evidence of your total income. Guidance is given below.

**If you receive tax credits you will be asked to supply a recent tax credit form for 2021/22 along with evidence as shown below.**

You may be asked to provide more than one piece of evidence.

	Evidence
Gross taxable annual salary / wages	2021 P60 <b>and</b> 3 recent monthly wage slips, or 6 weekly ones.
Self employment	Self assessment tax calculation 2021 or certified accounts
Private / Occupational pension/ state pension	Pension statement / Pension P60 2021/ <b>and</b> 3 recent bank statements
Benefits (Please specify) .....	Benefit letter such as Jobseekers , plus 3 recent bank statements.

**SECTION H: DECLARATION BY PARENT OR GUARDIAN**

It is important that you read the following statement carefully. We will not consider this application unless it is signed and dated by the family members whose income details have been declared above in Section F and G

*The information I have given on this form is accurate.*

*I will inform you immediately of any change in my personal circumstances as they occur.*

*I understand that if I provide false or incomplete information, I will have to repay any money given to the applicant to help with their study.*

Signed .....

Date: .....

Signed .....

Date: .....

**SECTION I: DECLARATION BY LEARNER**

*It is important that you read the following statement carefully. We will not consider this application unless it is signed and dated by you.*

- The information I have given on this form is accurate.
- I will inform you immediately of any change in either my own or my family's personal circumstances as they occur.
- I understand that if I provide false or incomplete information I will have to repay any money given to me to help me study.
- **I understand I must provide receipts for payments I receive.**

Signed .....

Date: .....

**16-19 BURSARY FUND**  
**2021/22 ACADEMIC YEAR**  
**Student Bank Details Form**

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**SECTION A: STUDENT BANK/BUILDING SOCIETY DETAILS**

Bank/Building Society	<input type="text"/>
Bank Address	<input type="text"/>
Bank Sort Code	<input type="text"/>
Bank Account Number	<input type="text"/>
<b>Your Bank Account Name on card</b>	<input type="text"/>
Building Society Roll Number (if applicable)	<input type="text"/>

STUDENT SIGNATURE .....

STUDENT NAME : .....

Tutor group