

Bursary Fund Application 2017-18

You must complete the form and bring it together with the Tax Credit Award Notice by the deadline on **Friday 29th September 2017**

PLEASE READ THE INFORMATION SHEET BEFORE COMPLETING THIS FORM.

PART A – TO BE COMPLETED BY STUDENT (Page 1 & 2)

PART B – TO BE COMPLETED BY PARENT(S) / CARER(S) (Page 3)

OFFICE USE ONLY	
Passport	<input type="checkbox"/>
TCAN	<input type="checkbox"/>
FSM	<input type="checkbox"/>
Date of assessment:	
Staff:	

PART A – Section 1 – Personal Information

Were you in receipt of the Bursary Fund last year?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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Student ID Number	<input type="text"/>	Personal Tutor	<input type="text"/>
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Surname	<input type="text"/>	Forename	<input type="text"/>
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Home Address	<input type="text"/>
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<input type="text"/>	Postcode	<input type="text"/>
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Telephone	<input type="text"/>	Mobile	<input type="text"/>
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Email	<input type="text"/>
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Date of Birth	<input type="text"/>	Age @ 31.8.17	<input type="text"/>	Nationality	<input type="text"/>
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Passport Number	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Passport Verification (OFFICE USE ONLY)	<input type="checkbox"/>
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Have you the right of abode and been resident in the UK for the last 3 years?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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If No , please indicate your current status	Refugee	<input type="checkbox"/>	Leave to remain	<input type="checkbox"/>	Asylum Seeker	<input type="checkbox"/>	Humanitarian Protection	<input type="checkbox"/>
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What date did you enter the UK or EU?	<input type="text"/>
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Please indicate who you live with	Parents	<input type="checkbox"/>	Relatives	<input type="checkbox"/>	On own	<input type="checkbox"/>	Other (please specify)	<input type="text"/>
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If living on your own please indicate how you support yourself financially	<input type="text"/>
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Are you in Local Authority care, a Care Leaver or living with foster family?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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IF YES, PLEASE PROVIDE A LETTER FROM THE LOCAL AUTHORITY CONFIRMING LOOKED AFTER STATUS

Are you (student) in receipt of Disability Living Allowance <u>or</u> Employment Support Allowance?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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Are you a parent who has responsibility for a child?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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PART A – Section 2 – Student Bank Information

Please fill this section in carefully and ensure the information you provide us is accurate. The details given here must relate to your own bank account and not a third party.

Name of Account Holder	
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Name of Bank / Building Society	
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Account Number									
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Sort Code						
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PART A – Section 3 - Learner Declaration

- I declare that the information on this form is true and accurate.
- I have made this claim for the Bursary Fund, fully aware that any false statements can lead to withdrawal/refusal of any financial support.
- 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 Fund will be paid on condition of standards of **attendance** and **progress on my courses**.
- I will attend regularly and complete the course for which my bursary is supporting me.
- I will notify my provider immediately with any changes to my Bank/Building Society details.
- I understand that monies I receive under the Bursary Fund have been awarded to provide me with financial support to allow me to continue in learning, and if I leave learning 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.

If your application is unsuccessful there is an appeals process.
You will receive a letter with guidance on how to appeal.

I confirm I have read the 'Learner Declaration' and I agree to all the above terms and conditions.

Signature of Student		Date	
Print Name			

PART B – Section 1 – Eligibility Check (Parent/Carer)

Does the young person live with you at the address shown?	Yes		No	
Are you the adult(s) responsible for the applicant?	Yes		No	

PART B – Section 2 – Income Details

DO YOU AS PARENT(S)/CARER(S) CLAIM ANY OF THE FOLLOWING BENEFITS AND/OR HAVE A HOUSEHOLD INCOME OF UNDER £16,190 PER YEAR? (PLEASE TICK AS APPROPRIATE)

Income Support		Employment and Support Allowance	
Disability Living Allowance		Working Tax Credit	
Child Tax Credit		Job Seekers Allowance (Income based)	
Self-Employed		Pension Credits	
Other Benefits (please specify)			

PLEASE PROVIDE YOUR ORIGINAL TAX CREDIT AWARD NOTICE SHOWING THE HOUSEHOLD INCOME FOR 2016-17.

PART B – Section 3 – Details of Parent(s) / Carer(s) & Parent/Carer Declaration

If the young person lives with you and you are the responsible adult/s for the applicant please sign below.

Parent/Carer 1

Surname		First Name	
Date of Birth		National Insurance Number	
I can confirm that the information given in this form is correct and complete to the best of my knowledge. I understand that the College has the right to share the information and evidence with the appropriate Government agencies if deemed appropriate.			
Signature			
Date			

Parent/Carer 2

Surname		First Name	
Date of Birth		National Insurance Number	
I can confirm that the information given in this form is correct and complete to the best of my knowledge. I understand that the College has the right to share the information and evidence with the appropriate Government agencies if deemed appropriate.			
Signature			
Date			

FREE SCHOOL MEALS

Please read the following information carefully.

NOT ALL APPLICANTS ELIGIBLE FOR THE BURSARY FUND WILL BE ELIGIBLE FOR FREE SCHOOL MEALS.

Who is Eligible?

Parent/ Carers/ students living independently do not have to pay for meals if they receive any of the following:

- Equal Based Jobseeker's Allowance / Employment and Support Allowance.
- Income Support (IS)
- Income based Jobseeker's Allowance (IBJSA)
- Income related Employment and Support Allowance (IRESA)
- Support under Part VI of the Immigration and Asylum Act 1999
- The guarantee element of State Pension Credit
- Child Tax Credit, provided they are not entitled to Working Tax Credit and have an annual income (as assessed by HM Revenue & Customs) that does not exceed £16,190

N.B. If you receive WORKING TAX CREDIT you do not qualify even if you receive child tax credit and your income is below £16,190

- Working Tax Credit 'run-on' – the payment someone may receive for a further four weeks after they stop qualifying for Working Tax Credit.
- Universal Credit

How to Apply:

Please complete the Free School Meal Eligibility form. You will also need to provide an up to date Proof of Benefit letter. (The letter should be dated no earlier than 15th August 2017). The completed form and the letter must be returned to the Attendance Office.

An email confirming the activation of Free School Meals will be sent to the student with instructions and guidance on how the system works. The parent/carer will also receive an email confirming the application has been successful.

YOU MUST INFORM THE COLLEGE OF ANY CHANGE IN CIRCUMSTANCES THAT COULD AFFECT YOUR ENTITLEMENT TO FREE SCHOOL MEALS.