

# WGGS SIXTH FORM: 16-19 BURSARY FUND APPLICATION 2020-21

Once completed please return to Mrs Raikundalia

## Student Details:

Surname/Family Name:		Form
First Names:		
Date of Birth:		
Address:		
Post Code:		
School Email address:		
Home Phone No:		
Mobile Phone No:		

## Parental/Carer Details:

	Parent 1	Parent 2
Surname/Family Name:		
First Names:		
Address: (if different from student)		
Post Code:		
National Insurance Number:		
Email address:		
Home Phone No:		
Mobile Phone No:		

This application for assistance from the 16-19 Bursary Fund is made under the priority group of:

**Guaranteed  
Bursary**

**Discretionary  
Bursary**

**Exceptional  
Circumstances**

Please state the purpose of the finance assistance below:

e.g. transport to/from school, books and equipment, course-related costs, transport to/from universities interviews, etc.

Are you a young person in care?	Yes	No
Are you a care leaver?	Yes	No

**Total Annual Household Income:**

**Evidence of household income must be provided.** Please attach photocopies to this form. Incomplete forms and/or lack of evidence will delay your assessment. Please complete each column, if no money is received enter £0.00. Amounts entered must be the total **annual** amount received.

Salaried Income (Below £25000)	£
Employment & Support Allowance and Disability Living Allowance	£
Income Support	£
Job Seekers Allowance	£
Asylum Seekers Support	£
Universal Credit	£
Working Tax Credit	£
Child Tax Credit	£
Personal Independence Payment	£
Housing Benefit	£
Child Benefit	£
Child Maintenance	£
Pension Credits	£
Self Employed Earnings	£
Other Benefits	£
Other Income	£
Number of dependent children	

Free school meals:

Is your daughter in receipt of free school meals?

Yes		No	
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If you meet any of the criteria below then your daughter might be entitled to free school meals:

- **Income Support**
- **Income-based Jobseekers Allowance**
- **Income-related Employment and Support Allowance**
- **Support under Part VI of the Immigration and Asylum Act 1999**
- **The guaranteed element of State Pension Credit**
- **Child Tax Credit** (as long as you're not also entitled to Working Tax Credit and you don't get more than **£16,190** a year)
- **Working Tax Credit run-on** (paid for 4 weeks after you stop qualifying for Working Tax Credit)
- **Universal Credit** (with annual earned income of no more than **£7,400** after tax and not including any benefits you get).

Apply today if you receive any of these benefits. It takes **5 mins** and in most cases we can tell you straightaway if your child can get free meals at school. [https://www.hertfordshire.gov.uk/ufs/HCWH.eb?ebd=0&ebz=1\\_15676735745](https://www.hertfordshire.gov.uk/ufs/HCWH.eb?ebd=0&ebz=1_15676735745)

### Student Bank Account Details:

You should check that your account can accept BACS Direct Credits

Bank Name (e.g. Nat West)

Branch Address

Name of Account Holder

Sort Code

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Account 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"/>
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Roll Number (Building Society Account)

### Declaration – to be signed by student and one parent/carer:

I confirm that the information given on this application form is true and correct. I/we also undertake to inform the school of any alterations to any of the particulars in writing. I agree to repay the school in full and immediately any sums advanced to me, if the information I have given is shown to be false or deliberately misleading.

I understand that if I leave the school before the completion of my course, payments will cease and any advanced payments will need to be repaid to the school.

I understand that funding covers only this school year, and that I must re-apply next year.

I understand that to receive the Bursary, I must meet the criteria of 100% attendance, unless absence is authorised, and meet the terms of my Sixth Form Contract.

Student's Signature: ..... Date: .....

Parent/Carer Signature: ..... Date: .....

**For Office Use:**

Date Received: ..... Evidence Provided: Yes/No

Bursary Approved: Yes/No      Type of Bursary: Guaranteed/Discretionary/Exceptional

Amount Awarded: .....per week      ..... single payment

Authorised by (name): ..... Date: .....

Signature: .....

First payment due: ..... Last payment due: .....

Additional Notes: