



POST 16 BURSARY FUND APPLICATION FORM: LEVEL 1: £1,200 VULNERABLE YOUNG PERSON.

You can qualify for this if **you** are living in care, are a care leaver, are receiving Income Support (IS) or Universal Credit (UC) or are disabled and are receiving Disability Living Allowance (DLA) or Personal Independence Payments (PIP) in your own right as well as Employment and Support Allowance (ESA) or UC in your own right.

PART 1: STUDENT DETAILS

Surname	First names
Date of Birth	Age on 31/8/2025
Home Address	Home Tel:
	Mobile Tel:
	Email:
Post code	
Have you been resident in the UK and islands for the whole of the three-year period preceding your course, other than for the purposes of full-time study? Yes ☐ No ☐ If 'NO' please give the date you moved to the UK.....	

PART 2: PARENT OR GUARDIAN DETAILS

Surname	Title and First Name
Home Address (if different from above)	Home Tel:
	Mobile Tel:
	Email:
Post code:	

PART 3: HOUSEHOLD DETAILS, PLEASE LIST ALL THOSE WHO LIVE WITH YOU

Name	Relationship to you	Age if under 16

Do you live in supported housing or foster care home? Yes ☐ No ☐
If YES please give key worker **contact name and phone number**.....

Please tick any of the following which apply to you

Young person in care. ☐	Disabled person in receipt of Disability Living Allowance or
Young person leaving care. ☐	Personal Independence payments and Employment Support
Young person in receipt of Income Support or ☐	Allowance or Universal Credit. ☐
Universal Credit. ☐	If you have ticked any of the above please provide evidence.



PART 4: COURSE DETAILS

Please list your subjects:	Tutor Group

PART 5: BANK ACCOUNT DETAILS: THIS MUST BE YOUR OWN BANK ACCOUNT AND NOT THAT OF YOUR PARENTS AND PAYMENT WILL USUALLY BE MADE BY DIRECT TRANSFER

Bank Name and sort code:	Bank Address:
Account Name:	Account number:

Thank you for your application, it will now be considered by the Bursary Panel and you will be informed of the decision as soon as possible. Any payment made is subject to the conditions set out in the letter to students, in particular in reference to attendance, punctuality and adherence to the sixth form agreement.

PART 6: DECLARATION

I certify that the information given above is correct and understand that the sixth form has the right to reclaim any funds and equipment if I am found to have provided incorrect information or do not complete my course. I will advise the sixth form immediately if my household circumstances change. I understand that any payment made is subject to the conditions set out in the letter to students, in particular in reference to attendance, punctuality and adherence to the sixth form agreement.

Signature of student:

Date:

Please return this form to Miss Gillott in the Sixth Form Office.

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School Use only:

Date of Panel Meeting:

Evidence seen:

Decision: