

The Long Eaton School 16-19 Bursary Application Form

Please note you can apply for this fund if you are under 19 years old on the 31st August at the start of your post 16 study as a full time student at The Long Eaton Sixth Form, provided that you meet the UK residency criteria.

Applications must be submitted to Mrs Lynn Reeve and must be accompanied with proof of income/benefits. All information will be treated in the strictest confidence.

PART A – Personal Information

First Name: _____ Surname: _____

DOB: _____

Address: _____

Contact Number: _____

Studies – please list below the sixth form courses you have been enrolled onto at The Long Eaton School

Vulnerable Groups (please tick if any of the below apply to you)

young person in care, including unaccompanied asylum-seeking children

young care leaver

young person getting Income Support or the equivalent Universal Credit (UC) in their own right

young person getting both Disability Living Allowance (or the new Personal Independence Payments) and Employment Support Allowance (ESA) (or Universal Credit as a replacement for ESA) in their own right

Please tick if any of the following circumstances apply to you

My parent/guardian is in receipt of Income Support

My parent/guardian is in receipt of Income-based Jobseekers Allowance

My parent/guardian is in receipt of Income-related Employment and Support Allowance

My parent/guardian is in receipt of Support under Part VI of the Immigration and Asylum Act 1999

My parent/guardian is in receipt of Support the guaranteed element of State Pension Credit

My parent/guardian is in receipt of Child Tax Credit (provided you're not also entitled to Working Tax Credit and have an annual gross income of no more than £16,190)

My parent/guardian is in receipt of Universal Credit

I am eligible for Free School Meals

Your Household

Please tick which best describes your household circumstances for the majority of time

I live with two parent/carers

I am in public care

I live with one parent/carer

Other

BANK ACCOUNT DETAILS

STUDENT'S FULL NAME	
BANK NAME	
BANK ADDRESS	
NAME OF ACCOUNT HOLDER (This must be the student)	
BANK SORT CODE	
BANK ACCOUNT NUMBER	

STUDENT DECLARATION

I understand that payment is conditional upon the 16-19 Bursary Terms and Conditions being met.

STUDENT NAME (PRINT)..... **SIGNATURE**..... **DATE**.....

PARENT DECLARATION

I understand that payments are conditional upon all the 16-19 Bursary Terms and Conditions being met.

PARENT NAME (PRINT)..... **SIGNATURE**..... **DATE**.....

DETAILS of CLAIM

Please specify items you would like to claim for and how this relates to your studies at The Long Eaton School.

Please include any proof of purchase

(if it is travel please include your bus tickets, if you require a mango card/train season ticket we can arrange payment for this online)

Item	Amount	Reason for Claim