

16-19 Bursary Fund 2020/21
Financial Assessment Form B

TO APPLY FOR THIS BURSARY YOUR HOUSEHOLD INCOME MUST BE
LESS THAN £20,000

Learner Details

Surname	
First name(s)	
Sex (M / F)	
Date of Birth (DD/MM/YYYY)	
Age on 31 st August 2020	
You must be aged 16, 17, or 18 on 31 st August 2020 to apply	

Learner's Address Details

Home Address	
Postcode	
Home telephone number	
Mobile telephone number	
E-mail address	

Financial Information

Are you and / or your sibling(s) eligible for free school meals at this school?	Yes / No
Sibling Name(s):	Form Group:

We understand that Covid has unfortunately impacted many households. If your financial circumstances have recently changed, or change during the academic year, please speak with the Post 16 team.

PARENTAL INFORMATION

Parent/Carer Details

	Person 1 (e.g. Mother)	Person 2 (e.g. Stepfather)
Surname		
First name(s)		
Relationship to Learner		
Full address		
Home Tel No		
Mobile		

Financial Assessment – Income

To be completed by the person(s) responsible for the household bills

Person 1	Are you employed? (Yes / No)	If Yes Please submit P60 for details	Are you a UK citizen? (Yes/No)	If No Please provide proof of residency
Person 2	Are you employed? (Yes / No)	If Yes Please submit P60 for details	Are you a UK citizen? (Yes/No)	If No Please provide proof of residency

*If you are **not** employed please tick the relevant boxes to indicate the benefit(s) you receive.*

Benefit Received	Universal Credit	Income Support	Job Seekers Allowance	Employment Support Allowance	Incapacity Benefit	Carer's Allowance	Housing Benefit	Council Tax Support
Person 1								
Person 2								

Financial Assessment – Other Income

Please tick the relevant boxes to indicate all other income received into the household

Other Income	Working Tax Credit	Child Tax Credit	Child Benefit	Grants or Bursaries etc.	Any other income / benefit – please specify
Person 1					
Person 2					

Whatever you have declared above must be backed up by evidence (photocopies accepted) in order for an assessment to be made.

The tables below show the evidence you will need to provide with your application form.

Once you have declared and identified your benefits on the application, find the 'Type of Income' that applies to you in the first column and the 'Evidence Required' column will tell you what you need to provide.

Type of Income	Evidence Required
Universal Credit	Entitlement/Award letter 3 most recent monthly statements
Annual Salary	P60 for tax year 2019-20 OR Week 52 (last week in March 2020) payslip OR Month 12 (March 2020) payslip
Income Support	Entitlement / Award letter Dated within the last 3 months
Job Seekers Allowance	Entitlement / Award letter Dated within the last 3 months
Employment Support Allowance	Entitlement / Award letter Dated within the last 3 months
Incapacity Benefit	Entitlement / Award letter Dated within the last 3 months
Carer's Allowance	Entitlement / Award letter Dated within the last 3 months
Housing Benefit	Entitlement / Award letter Dated within the last 3 months
Council Tax Support	Entitlement / Award letter Dated within the last 3 months
Any other benefit	Entitlement / Award letter Dated within the last 3 months
Working Tax Credit	Working Tax Credit Award Notice marked 2019-20 Must be for full year and not partial awards (FULL AWARD NOTICE)
Child Tax Credit	Working Tax Credit Award Notice marked 2019-20. Must be for full year and not partial awards (FULL AWARD NOTICE)
Child Benefit	Award letter
Grants or bursaries etc.	Relevant paperwork detailing entitlement and amount paid
Disability Living Allowance	Entitlement / Award letter Dated within the last 3 months
Any other income e.g. pension/self employed	Relevant paperwork from Inland Revenue

Payments

To receive payments, you must have a bank account in your own name. If you do not have a bank account, you need to open one before completing this form.

Bank and Branch Name:	
Bank Sort Code:	
Bank Account Number:	
Name of Account Holder:	

Declaration

Please read the declaration below carefully before signing:

1. I declare that the statements made on this form are true and to the best of my knowledge and belief are correct in every respect. I undertake to supply any additional information that may be required to verify the particulars given. I understand that if I refuse to provide information relevant to my claim the application will not be accepted. I also undertake to inform the school of any alteration 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.
2. I am aware that the funding covers only this school year and that I must re-apply next year; there is no guarantee that I will receive funding for future years even if I am eligible for the current year.
3. I agree to abide by the expectations set out in the Student Learning Agreement.
4. If I fail to declare any information about any part of my income that is relevant, or give false or incomplete information, I am aware that the matter may be referred to the Department of Education or the police and that I could face prosecution.

Signed Learner: Date:
.....

(Print Name)

Signed Person 1: Date:
.....

(Print Name)

Signed Person 2: Date:
.....

(Print Name)

For School use only:

Date Received: _____

Attendance Percentage: _____

Eligibility Checked by: _____

Signed (Sixth Form): _____