



BOURNE ACADEMY 16 - 19 BURSARY FUND APPLICATION

Prior to completing this form please refer to the Bursary Fund Guidance Notes.
Please ensure that proof of entitlement is included with this application form when submitted.

STUDENT DETAILS

| | |
|----------------------|--|
| SURNAME | |
| FIRST NAME/S | |
| DATE OF BIRTH | |
| ADDRESS | |
| | |
| | |
| POSTCODE | |

PARENT/CARER DETAILS

| | |
|---|--|
| | |
| SURNAME | |
| FIRST NAME/S | |
| DATE OF BIRTH | |
| ADDRESS | |
| | |
| | |
| POSTCODE | |
| NATIONAL INSURANCE NUMBER | |
| HOUSEHOLD INCOME (Please supply the appropriate evidence which will be treated in the strictest confidence) | |

We confirm that the details on this form to support this Bursary application are true and accurate.

We accept that the student named above must comply with the terms of the Bourne Academy Bursary Fund Guidance Notes or funding may be withdrawn.

We understand that all changes in financial circumstances must be immediately reported to the Bursary Fund Administrator.

| | |
|---------------------------|--------------|
| Student signature: | Date: |
|---------------------------|--------------|

| | |
|--------------------------------|--------------|
| Parent/Carer signature: | Date: |
|--------------------------------|--------------|

BOURNE ACADEMY 16 - 19 BURSARY FUND APPLICATION

We have read the Bourne Academy 16 – 19 Bursary Fund Guidance Notes that explain the amount of funding that may be available. (Please tick the box to confirm.)

Please indicate below the level of support you are applying for and the reasons why by ticking the appropriate box.

| Level 1 Support Vulnerable Bursary £1,200 per academic year | Level 2 Support Discretionary Bursary | Level 3 Support Discretionary Bursary |
|---|--|---|
| I am living in care | My gross household income including benefits is less than £24,500 | I have an identifiable need and wish to apply for a discretionary bursary |
| I am a care leaver | My household is in receipt of means tested benefits | |
| I am in receipt of Income Support or Universal Credit | | |
| I am in receipt of both Employment Support Allowance and Disability Living Allowance or Personal Independence Payment | Please refer to the 16 – 19 Bursary Fund Guidance Notes for the proof of income evidence required to support your application | |

Please provide details below of the items for which you require financial support. Receipts for these items will need to be submitted to the Bursary Fund Administrator once they are purchased.

| | |
|---------------------------------|--|
| Transport requirements | |
| School trips/visit requirements | |
| Equipment/resources | |
| Any other items | |

For office use only

Date received:

Date reviewed:

Supporting Evidence:

| | | | |
|-----------------|------------------------|------------------------|------------------------|
| <i>Approval</i> | <i>Level 1 Support</i> | <i>Level 2 Support</i> | <i>Level 3 Support</i> |
| | <i>£1,200</i> | | |
| <i>Declined</i> | <i>Reason</i> | | |

Student Bank or Building Society details for payments

STUDENT DETAILS

| | |
|---------------|--|
| SURNAME | |
| FIRST NAME/S | |
| DATE OF BIRTH | |
| ADDRESS | |
| | |
| | |
| POSTCODE | |

BANK/BUILDING SOCIETY DETAILS

| | |
|----------------------------|--|
| ACCOUNT HOLDER NAME | |
| BANK/BUILDING SOCIETY NAME | |
| BRANCH | |
| SORT CODE | |
| ACCOUNT NUMBER | |
| ROLL NUMBER | |