

16-19 BURSARY APPLICATION FORM

2020 - 2021 ACADEMIC YEAR



PROTECTION OF PUBLIC FUNDS

We must protect the public funds we handle and so we may use the information you have provided on this form to prevent and detect fraud. We may also share this information, for the same purposes, with other organisations that handle public funds, and with this in mind, a sample of applications will be chosen at random for full investigation.

DATA PROTECTION

The data controller is Mrs Julie McCaslin. The data you provide to St Benedict's Catholic High School will be used to assess and facilitate your entitlement to help from the 16-19 Bursary Fund. St Benedict's, in fulfilling its data protection obligations will treat all personal data, held manually and on a computerised database with due care, and will only disclose data in accordance with the Data Protection Act 2018.

Section A: Personal details

Name of student		Tutor Group	
Date of birth			

Section B: Course details

Course	A Levels/BTEC		IB Diploma/Courses	
Year of study	Year 12		Year 13	

Section C: Learner Circumstances

How many people are in your household?				
Number of dependent children in the household				
Who do you live with? Please tick all that apply	Mother/ stepmother	<input type="checkbox"/>	Father / stepfather	<input type="checkbox"/>
	Brother / sister	<input type="checkbox"/>	Grandparent	<input type="checkbox"/>
	Foster parents	<input type="checkbox"/>	In care/ looked after	<input type="checkbox"/>
Have you always lived in the UK?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Do you have to pay for transport to school each day?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>

Section D: Learner Income

Part time job	£	weekly
Benefits	£	weekly
Other	£	weekly

Section E: Support Required

Support requested	Details	Approx. Amount
Travel		
Meals		
Equipment / books		
Clothing		
Field Trips		
Food		
Other – please detail		

Section F: Please tick one or all that apply

I am or my family are in receipt of Free School Meals	
I am or my family are in receipt of Universal Credit/Income Support/ Jobseekers Allowance	
My household's gross taxable income is less than £30,000 a year	
I am in receipt of Disability Living Allowance / Personal Independence Payments as well as Employment and Support Allowance or Universal Credit	

Section G: Household income

	Parent 1	Parent 2	Evidence – Please submit a copy with application
Gross taxable annual salary / wages	£	£	P60 or end of March 2019 payslip
Latest pay slip	£	£	Payslip from current employer
Self-employment	£	£	Self-assessment tax calculation 2018-19 or certified accounts
Pension – private / occupational	£	£	Pension statement / Pension P60 2043
State pension	£	£	Pension statement / Bank statement

As you are probably aware, Universal Credit will ultimately be replacing many of the current benefits. We are still in a period of transition so please detail the benefits you are currently

Benefit	Please tick	Evidence
Universal Credit		Universal Credit award notice and the most recent 3 months of statements
Working Tax Credit		HMRC Working Tax Credit award notice
Child Tax Credit		HMRC Child Tax Credit award notice
Income Support		Income Support award notice
Council Tax & Housing benefit		Council Tax and Housing Benefits award notice
Other benefit		

receiving and submit a copy of the evidence.

H. Declaration by Parent/Guardian

Please read the following statement carefully. It needs to be signed by the family members whose income details have been declared in Section G:

- The information I have given on this form is accurate
- I will inform you immediately of any change in my personal circumstances as they occur
- I understand that if I provide false or incomplete information, I will have to repay any money given to the applicant to help with their study. I am also aware that this may result in a referral to the police with the possibility of prosecution.

Signed: _____

Date: _____

Name: _____

Signed: _____

Date: _____

Name: _____

I. Declaration by Learner

Please read the following statement carefully:

- The information I have given on this form is accurate
- I will inform you immediately of any change in either my own or my family's personal circumstance as they occur.
- I understand that if I provide false or incomplete information, I will have to repay any money given to me to help me study.

Signed: _____

Date: _____