



**BOURNE
ACADEMY**

16-19 Bursary Fund

APPLICATION FORM

Prior to completing this form please refer to the 16-19 Bursary Fund Information Pack.

Please ensure that proof of entitlement is included with this application form when submitted.

Student details

Surname	
First Name(s)	
Date of Birth	
Address	
Post Code	

Parent/carer details

Surname	
First Name(s)	
Date of Birth	
Address	
Post Code	
National Insurance Number	
Household Income	Please provide 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student named above must comply with the terms of the Bourne Academy Bursary Fund Application Pack or funding may be withdrawn.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

Bursary Fund Application

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		Level 2 Support Discretionary Bursary	
I am living in care		My gross household income including benefits is less than £30,000	
I am a care leaver		My household is in receipt of means tested benefits	
I am in receipt of Income Support or Universal Credit		Please refer to the 16–19 Bursary Fund Information Pack for the proof of income evidence required to support your application	
I am in receipt of both Employment Support Allowance and Disability Living Allowance or Personal Independence Payment			

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		
Approval	Level 1 Support £1,200	Level 2 Support
Declined	Reason	

Payment details

Please provide the student Bank or Building Society details for payments.

STUDENT DETAILS

Surname	
First Name(s)	
Date of Birth	
Address	
Post Code	

BANK / BUILDING SOCIETY DETAILS

Account holder name	
Bank / Building Society name	
Branch	
Sort Code	
Account Number	
Roll Number	