



## 16-19 Bursary Fund 2025/26

### Application Form

#### 1.1 Learner Details

Surname :	
First name(s):	
Sex (M/F):	
Date of Birth (dd/mm/yyyy)	
Age on 31 August 2025	
Do you have an Education Health Care Plan (EHCP)?	

#### 1.2 Contact Details

Home Address			
		Postcode:	
Home telephone number:			
Learner's mobile number:			
Learner's email address:			
Have you the right of abode and been resident in the UK for at least 3 years:	Yes <input type="checkbox"/> / No <input type="checkbox"/>		

#### 1.3 Your Bank or Building Society Account Details

The Education Funding Agency does not expect the bursary to be paid into another person's account, unless in exceptional circumstances where a learner is unable to administer their own account. Learners aged 16 can open a basic bank account, which will allow payments by bank transfer, and the learner to withdraw money. More information on basic bank accounts can be found via the following Money Advice Service link: <https://www.moneyadviceservice.org.uk/en/articles/basic-bank-accounts>

Full name of account holder: (as it appears on your bank card)	
Name of Bank/Building Society:	
Sort code:	
Account number:	

### 1.4 Vulnerable Learner Priority Group

<p>Learners can receive a bursary of up to £1,200 p.a. if at least one of the following applies and there is an assessed need for financial support:</p> <ul style="list-style-type: none"> <li>• you are a young person in care or care leaver</li> <li>• you receive Income Support or Universal Credit in your name</li> <li>• you are a disabled person getting Disability Living Allowance or Personal Independence Payment, plus Employment and Support Allowance or Universal Credit in your name</li> </ul>	<p>Yes <input type="checkbox"/> / No <input type="checkbox"/></p> <p>Yes <input type="checkbox"/> / No <input type="checkbox"/></p> <p>Yes <input type="checkbox"/> / No <input type="checkbox"/></p>
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If the answer is yes to any of the above benefits please attach a copy of your entitlement/award letter - dated within the last 3 months.

If you think you also may be eligible to receive a discretionary bursary you should complete section 2 below. Otherwise please **go straight to section 5.**

### 2. Financial Assessment

Are you in receipt of Free School Meals?	Yes <input type="checkbox"/> / No <input type="checkbox"/>
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#### 2.1 Household Members (Adults)

Details	Person 1	Person 2
Surname:		
First name(s):		
Relationship to learner:		
Telephone:		
Email:		

#### 2.2 Income

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

#### Employment

Person 1	Are you *employed/self-employed? Yes <input type="checkbox"/> / No <input type="checkbox"/>	Insert your annual gross earnings (pre-tax) £	If yes, please submit *P60/self-assessment tax return
Person 2	Are you *employed/ self-employed? Yes <input type="checkbox"/> / No <input type="checkbox"/>	Insert your annual gross earnings (pre-tax) £	If yes, please submit *P60/self-assessment tax return

\* Please delete as appropriate

If you are not employed please insert the annual amount of the following benefits you receive.

<b>Benefit Received</b>	<b>Person 1 (£ p.a.)</b>	<b>Person 2 (£ p.a.)</b>
Universal Credit		
Income Support		
Income-based Jobseeker's allowance		
Income-related Employment and Support Allowance		
Personal Independence Payment		
Carer's Allowance		
Housing Benefit		
Council Tax Benefit		

Please indicate in the relevant boxes the annual amounts of all other income received into the household.

<b>Other income</b>	<b>Person 1 (£)</b>	<b>Person 2 (£)</b>
Working Tax Credit		
Child Tax Credit		
Child Benefit		
Grants or Bursaries		
Any Other Income/ Benefit (please specify)		

### 3. Evidence

**Whatever you have declared in section 2.2 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.

**You only need to provide one of the following for each type of income received:**

#### Employment

<b>Type of Income</b>	<b>Evidence Required</b>
Annual Salary	P60 for tax year 2024-25, or week 52 (last week in March 2024) payslip or month 12 (March 2025) payslip
Self Employed	Copy of Self Assessment tax return 2024-25

#### Benefit Received

<b>Type of Income</b>	<b>Evidence Required</b>
Universal Credit	Entitlement/award letter – dated within the last 3 months
Income Support	Entitlement/award letter – dated within the last 3 months
Income-based Jobseeker's allowance	Entitlement/award letter – dated within the last 3 months
Income-related Employment and Support Allowance	Entitlement/award letter – dated within the last 3 months
Personal Independence Payment	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 Benefit	Entitlement/award letter – dated within the last 3 months

**Other Income**

Type of Income	Evidence Required
Working Tax Credit	Working Tax Credit Award Notice marked 2024-25. Must be for full year and not partial awards (FULL AWARD NOTICE)
Child Tax Credit	Child Tax Credit Award Notice marked 2024-25. Must be for full year and not partial awards (FULL AWARD NOTICE)
Child Benefit	Award letter
Grants or Bursaries	Relevant paperwork detailing entitlement and amount paid
Any Other Income/Benefit (please specify)	Relevant paperwork

**4. Bursary Funding Need**

Complete the table below summarising how much bursary funding you are seeking under each area (as applicable) and give brief details in support of the amounts sought e.g. what essential books you need.

No.	Description of Funding Need (continue on separate sheet if required)	Funding Required for Year (£)
1	<u>Unavoidable Home to School Transport</u>	
2	<u>Essential Books / Equipment</u>	
3	<u>Field Trips</u>	
4	<u>Other Course-Related Costs</u>	
	<b>TOTAL BURSARY SOUGHT</b>	

**5. Declaration**

Please read the declaration below and read carefully before signing:

- I declare that the statements made on this form are true and to the best of my knowledge and believe 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 an 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.
- 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.

Signed (Learner): ..... Date: .....

Signed (Person 1 or 2): ..... Date: .....

**Return completed forms plus supporting documents to Student Reception by Friday 12/09/25**