

FPTA ACADEMIES TRUST

16-19 BURSARY FUNDING APPLICATION FORM 2021-22

Prior to completing this form, please read the Bursary Funding Statement attached to ensure you are eligible to apply and understand the conditions of the funding if awarded.

Important Information:

- Please complete all sections of the form applicable and make sure you provide copies of the required evidence to support your application. Your application will not be assessed if the form is incomplete or there is missing evidence
- The closing date for applications is Friday 10th September 2021. If you are experiencing financial hardship after this date, please inform the Head of Sixth Form
- Please bear in mind the funding we have is limited so we cannot guarantee we will be able to provide you with the financial support you have requested.
- Payment of the bursary is dependent upon your behaviour, attainment and compliance with the Sixth Form Code of Conduct
- The decision of an award will be made by a panel of 3 members of staff
- Financial support in the form of a cash payment is rare and would only be made in exceptional circumstances supported by documented evidence

SECTION 1 – PERSONAL DETAILS

	T
Student Name:	Year Group:
School:	Date of Birth:
Home Address (include postcode):	
School Email:	Home Phone:
Alternative Email:	Mobile Phone:
Bank Account Number:	Sort Code:
Account Holders Name:	
SECTION 2 — BURSARY APPLIED FOR (please tick as appropriate and	1 complete relevant section)
Level 1 Vulnerable (please complete section 3) Level 2 Discretiona (please complete section 4)	·



SECTION 3 – LEVEL ONE VULNERABLE GROUPS (Up to £1200 of financial support)

Student Status	Evidence to be provide	led
	Please supply supporting I	etter from your
am Living in Care / A Care Leaver	keyworker or social worke	er or your discharge
	from care documentation	
Student Status	Evidence to be provide	led
am receiving Income Support or Universal	Benefits paperwork dated	within the past 8
Credit because I am financially supporting	weeks e.g. Entitlement/Av	•
myself and/or a dependent who lives with me	weeks eig. Entitlementy / t	
Student Status	Evidence to be provide	led
am receiving Disability Living Allowance and	-	
either Employment Support Allowance or	Benefits paperwork dated	-
Universal Credit	weeks e.g. Entitlement/Av	ward letter
Student Status	Evidence to be provide	led
am receiving Personal Independence	Benefits paperwork dated	within the past 8
Payments and either Employment Support	weeks e.g. Entitlement/Av	•
Allowance or Universal Credit		
am currently receiving or have in the past 6	Evidence to be provide	
am currently receiving or have in the past 6 years received Free School Meals (Ever 6)	FSM Entitlement/Award L	
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Student Status am eligible for FSM because my parents/guar following benefits: Income Support	FSM Entitlement/Award L	Evidence to be provided Benefits paperwo dated within the past 8 weeks e.g.
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Student Status am eligible for FSM because my parents/guar following benefits: Income Support Income based Job Seekers Allowance Allowance Support under part VI if the Immigrati The Guarantee element of state pensi Child Tax Credit (but not entitled to w annual income below £16190 per ann Working Tax Credit Run-On Universal Credit with household incor (after tax and excluding benefits) Student Status am the child of a member of Service	dians receive one of the or Employment & Support on and Asylum Act 1999 on credit orking tax credit) with an um ne below £7400 per year Evidence to be provice Paperwork to support the	Evidence to be provided Benefits paperwo dated within the past 8 weeks e.g. Entitlement/Awar letter Bed employment status



SECTION 5 – LEVEL THREE DISCRETIONARY (Up to £450 of financial support)

(please tick as appropriate and provide the Evidence required)

	Student Status	Evidence to be provided
	The family gross household income is below £25000 (including Universal Credit)	Parent/Guardian to complete table below
Name	of Father:	Father's Occupation:
Name	of Mother:	Mothers Occupation:
Name	of Guardian/Carer:	Guardian/Carer's Occupation:
Numb	er of dependents in the household	
	the age of 19 and in full time	
educa	tion:	

Details of your family income for the last financial year (6th April 2020-5th April 2021). Please complete all boxes stating the income amount or entering 'N/A' if not Applicable

	£
Fathers gross Income from main/self employment	
Fathers gross income from additional / part-time work	
Mothers gross Income from main/self employment	
Mothers gross income from additional / part-time work	
Guardian/Carer's gross Income from main/self employment	
Guardian/Carer's gross income from additional / part-time work	
Child Benefit	
Income Support/Job Seekers Allowance (income based)	
Employment Support Allowance/Job Seekers Allowance (contribution based)	
Working Tax Credit	
Child Tax Credit	
Widows Pension / Widowed Mothers Allowance	
State Pension	
Total of Other Employers Pensions	
Disability Pension / Benefit	
Separation Allowance/Maintenance/Child Support	
Universal Credit	
Any Other Income (please provide details) e.g. Investment/Savings Income	
TOTAL	



SECTION 6 – PURPOSE OF FUNDING

Please state below the individual item details and cost of the required resources you are applying for in the relevant section. If the section is not applicable leave it blank.

Resource/Service	Details	Estimated
1100001100,0010100	2000.00	Cost in £'s
Home to school transport (Please investigate the most economical method) (NB: Yr13 students usually finish school at the end of Term 5 and only attend school for exams or revision sessions in T6)	e.g. annual/termly travel pass Term 1 = 32 days Term 2 = 35 days Term 3 = 29 days Term 4 = 30 days Term 5 = 28 days Term 6 = 35 days	
Books/Revison Guides (Your subject teachers will be able to assist/advise)	e.g. state ISBN reference and title of the book(s) (List on a separate piece of paper if required)	
NB – These items are loaned and must be returned at the end of your course of study		
Equipment	e.g. Laptop / graphical calculator	
NB – These items are loaned and must be returned at the end of your course of study		
Sixth Form Uniform		
Course related Protective Clothing	e.g. Lab/Art Coat / Sportswear for PE	
School Trip/Visit/Activity (Your subject teachers may be able to assist/advise) NB – Must be a requirement of your course of study	e.g. Theatre trip for English to support coursework	
UCAS Fees (Yr13 only)		
Travel to / from University Open Days		
School Meals (Current allowance is £2.40 per day; term time only)		
Any Other Items NB – Must be eligible under the terms of the 16-19 Bursary Funding		



SECTION 7 – SUPPORTING STATEMENT

Please state below any additional information relating to your fin circumstances that you wish to be taken into consideration when assessed by the panel and how you feel this funding will support	your application is being
SECTION 8 – PARENT/GUARDIAN DECLARATION (not required fo	or Level One Applications)
Please ensure this section is signed and dated by a parent/guard application may not be assessed	dian otherwise your
	e to the best of my
I declare that the information provided on this form is correct and true knowledge in every respect, and I undertake to inform the school of a	e to the best of my ny changes in the particulars I before the end of their sts 16-19 Bursary Funding
I declare that the information provided on this form is correct and trucknowledge in every respect, and I undertake to inform the school of a given concerning my financial circumstances. If for any reason the student making this application leaves the school course of study or fails to comply with the conditions given in the Trus Statement for which they have been granted an award, I undertake to	e to the best of my ny changes in the particulars I before the end of their sts 16-19 Bursary Funding o inform the Director of the
I declare that the information provided on this form is correct and true knowledge in every respect, and I undertake to inform the school of a given concerning my financial circumstances. If for any reason the student making this application leaves the school course of study or fails to comply with the conditions given in the True Statement for which they have been granted an award, I undertake to 6 th Form / School Office immediately. I understand that if I knowingly provide misleading or false information	e to the best of my ny changes in the particulars I before the end of their sts 16-19 Bursary Funding o inform the Director of the



SECTION 9 – STUDENT DECLARATION

Please read the declaration carefully before signing

I declare that the information provided on this form is correct and true to the best of my knowledge in every respect, and I undertake to inform the school immediately of any changes in the particulars given concerning my circumstances.

I also undertake to supply any additional information that may be requested to support my application if requested and understand that if I refuse to provide the relevant documents it will not be accepted.

I have read and understood the conditions of the 16-19 Bursary Funding Statement and am aware of the requirements for behaviour, attainment and compliance with the 6th Form Code of Conduct.

I understand that if I knowingly provide misleading or false information I may be liable to prosecution and disciplinary procedures.

Name of student (Block Capitals)	
Signature	Date

For Office use:

Date Application Received	
Date of Assessment	
Signed by Assessment Panel	
Name:	Signature
Name:	Signature
Name:	Signature
Date Award/Non-Award Letter Sent	