

## Queen Elizabeth High School 16-19 Bursary Scheme Application Form 2024/25

Please complete this form and return it to the sixth form pastoral team with copies of supporting evidence for household income, and any receipts for expenditure. All information can be scanned and emailed to <a href="mailto:ebrown@qehs.net">ebrown@qehs.net</a>

Surname:

First name:

**Student Details** 

Title:

Date of birth:			Age at 31/8/2	24:			
Address:							
Postcode:		Telephone:			Email:		
Have you the right of abode and been resident in the UK for the last 3 years? Yes					Yes	No	
Subjects being studied in the sixth form in 2024/25 (please list):							
Bursary Criteria							
To qualify you must be aged 16, 17 or 18 on 31 August 2024 and meet the ESFA's residency criteria. The bursary is paid to enable you to attend education.							
Vulnerable Bursary Criteria							
To qualify, you (the student) must fall into one of the below categories and produce the required evidence as stated.							
Are you in receipt of Income Support or Universal Credit because you are financially supporting yourself? (Evidence required – Income Support or Universal Credit award letter).						Yes No No	
Are you a care leaver or currently looked after in care? (Evidence required - letter from local authority).					Yes No No		
Are you in receipt of Disability Living Allowance or Personal Independence Payments in your own right <b>as well as</b> Employment and Support Allowance or Universal Credit in your own right?  (Evidence required – Income Support or Universal Credit award letter <b>and</b> evidence of DLA/PIP).  Yes No DLA/PIP					Yes No No		

Discretionary Bursary Criteria The person responsible for household bills should complete this section.							
Your household income is one of the criteria which will help us to assess your application.							
within the last three months whapplication for bursary paymer	nere a <sub>l</sub> nts.	pplicable. If you car	nnot provide evi	dence		ed	
If you or your siblings are in receipt of Free School Meals you do not need to provide further financial information in the section below – please proceed to Free School Meal Section.							
Income Support/Universal Credit award letter		Working/Child Tax Credit – Full award notice for full year along with supporting evidence of earnings if applicable			Self-employed earnings (official tax return)		
Housing Benefit		Carer's Allowance			Child Benefit (award letter)		
P60 for tax year 2023/24 or Wage slips for household (month 12 or week 52 – March 2024)		Disability Living Allowance or Personal Independence Payments			Any other benefits or income/pension – please specify		
Please list the names of the ho	ouseho	old members and th					
Name			Relationship to	o stud	ent		
Free School Meals							
Are you or your sibling(s) in re	ceipt c	of free school meals	? Yes 🗌 No	П			
Name(s) of sibling(s)	<u> </u>						
-			g your per	son	al circumstances leadin	g to	
this financial need (Required)							
Transport to and fro	m so	<b>chool</b> see also N	CC's Post-16 tr	anspo	rt policy on their website for further	details.	
Do you use school transport or public transport to get to and from school? Yes \( \square\) No \( \square\)							
If you answered Yes to the que	estion	above, please sele	ct the correct op	otion b	elow:		
☐ I am entitled to free transport from NCC and have paid a £50 administration charge to apply for this.							
☐ I am entitled to free transport from NCC but did not have to pay the £50 administration charge to apply for this.							
☐ I have a place on NCC transport for which I pay £360 per year.							
☐ I use public transport v	which (	costs £	per week/mon	nth/terr	m/year (delete as appropriate).		

Please provide copies of receipts for any expenditure already incurred.

Financial support required						
	Tick if required	Expected amount (if known), £				
Transport (excluding school transport in the section above)						
Books						
Equipment						
Trips						
Meals						
Travel to university interviews						
Other (please state)						
TOTAL						
Please provide copies of receipts for any expenditure already incurred, including any transport costs.						
Bank details						
Please be aware that we plan to pay the majority of discretionary bursary awards 'in kind' e.g. by purchasing any equipment required or paying for trips. Vulnerable bursary payments will be paid directly into students' bank accounts, as will any amounts authorised that have already spent (receipts required). Please provide your bank details below, as printed on your bank card or statement.						
Account Holder's Name as it appears on bank statement:						
Bank Name and Branch:						
Account number:	Sort code:					

Please read and sign the declaration overleaf

## DECLARATION

Award/rejection letter issued

- I have read and understand the 16-19 Bursary Policy and other information provided.
- I have made this claim for bursary, fully aware that any false statements can lead to withdrawal/refusal of any financial support and may leave me open to prosecution.
- I understand that if I refuse to provide information which may be relevant to my claim, the application will not be accepted.
- I understand that monies I receive under the Bursary Scheme will be paid on condition of standards of attendance and behaviour.
- When financial changes to my household occur, which may result in changes to my claim, I will notify the school immediately.
- I understand that any bursary monies I receive under the scheme are awarded to provide me with financial support to allow me to continue in education, and if I leave education all financial support will stop.
- I understand that I do not have an automatic entitlement to Bursary payments, and all payments are based on the information I have provided.
- Any equipment provided will remain the property of the school and I will return it in good condition at the end of the course.
- I understand I have the right to appeal if I disagree with the outcome of my Bursary Application. This appeal should be made to the Chief Financial Officer at the school.
- I am aware that the funding covers only this school year and that I must re-apply next year.

I declare that the information on this form is true and acc	curate to the best o	f my knowledge.		
Signed (student) Sign	ned (parent/carer)			
Student name Par	rent/carer name			
		<b>X</b>		
School assessment of application (for s	chool use only	)		
Age criteria checked	Residency c	riteria checked		
Eligible education provision	Evidence of	eligibility retained		
Documentation reviewed (type and date)				
Annual household income	£			
Attendance record for preceding half term				
Bursary type	Vulnerable/Discretionary (delete as required)			
Proposed amount of award	£	TOTAL AWARD		
	Date	Signed		
Checks completed by				
Pastoral approval				
CFO sign off				