

16-19 Bursary Funding Application 2024/2025



Student Details

Surname/Family Name			
First Name(s)			
Date of Birth			
Address			
Post Code			
School login (e.g. 01AA11)		Reg. Group	
Home Phone		Mobile Phone	
Are you in foster Care?	Y / N		
Have you been eligible for Free School Meals in the last 5 years?	Y / N		
Details of what financial assistance is to be used for. eg: transport, books, educational visits, or other course materials or equipment essential to successfully completing your programme of study.			
Reason(s) why financial assistance is being requested.			

Please attach up to date evidence of your eligibility, as detailed in the Academy Bursary Policy.

I confirm that the above details are true and accurate.

Student Signature		Date	
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Office use only:

Bursary Awarded	£	Authorised:	Date	
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If your application is successful, payments will be made directly into a bank account which can accept BACS transfers and **MUST be in your own name.**

Please complete the section below and return this form to the Academy Finance Office, either with your application, or immediately following receipt of confirmation of a Bursary Award.

Bank or Building Society Details

Name of Account Holder	
Name of Bank/Building Society	
Sort Code (6 digit no.)	
Account Number (8 digit no.)	
Building Society Roll no. (if applicable)	



BURSARY: EXPENSES CLAIM FORM

Student Name: _____

Form: _____

<u>Date</u>	<u>Details</u>	<u>Amount</u>	<u>Receipt No.</u>
	Total		

CLAIMANT'S CERTIFICATION

The particulars stated are correct and all claims are supported by receipts (or a note of explanation if receipts are unobtainable).

Signed (student): _____

Date: _____

Checked by: _____

(6th Form Coordinator)

Date: _____

N.B. THIS FORM MUST BE AUTHORISED BY 6th Form Coordinator BEFORE PASSING TO FINANCE

Office use only

Scan ref: _____

Checked & Entered: _____

Payment Approved: _____