| **1.1 Student Details** |  |  |
| --- | --- | --- |
| **Surname** |  | **Forename** |  |
| **Date of Birth**  |  | **Age on next 31 August**  |  |

| **1.2 Address Details** |
| --- |
| **Home address** |  |
|  |
|  |
|  |
| **Post code** |  |
| **Home telephone number** |  |
| **Mobile telephone number** |  |
| **Student e-mail address** |  |

| **1.3 Student Bank or Building Society Details (Payments cannot be made into the account of a parent, guardian or carer)** |
| --- |
| **Full Name of Account Holder** |  |
| **Name of Bank or Building Society** |  |
| **Sort Code** |  |
| **Account Number** |  |
| **Bank Card Number (Last 4 only of the 16-digit number)****This card *must* be used when purchasing items for reimbursement through the 16-19 Bursary Fund** | \*\*\*\* \*\*\*\* \*\*\*\*  |

| **1.4 Student Course Details** |  |  |
| --- | --- | --- |
| **Full-time (More than 30 weeks per year) 🞏**  | **Part-time (Less than 30 weeks per year) 🞏** |
| **Subject** | **Subject** |
| **Subject** | **Subject** |
| **Subject** | **Subject** |
| **Subject** | **Subject** |
| **Subject** | **Subject** |

| **2.1 Financial Information** |
| --- |
| **Are you in receipt of Free School Meals (FSM)?**  | **🞏 Yes** **🞏 No** |
| **If you are in receipt of FSM go directly to Section 4.1, (page 3), and sign and date the declaration. Please note, we will require site of the original ‘Confirmation of Entitlement’ letter issued by the local authority to your home address.**If you are ***not*** in receipt of FSM but are eligible to receive a Vulnerable Bursary of up to £1,200 per annum, please see Ms Kelly, Post 16 Student Support, for guidance on completing the form. |

| **2.2 Parent/Guardian Details** |  |  |  |
| --- | --- | --- | --- |
|  | **Person 1** | **Person 2** |
| **Surname** |  |  |
| **Forename** |  |  |
| **Relationship to student** |  |  |
| **Contact telephone number** |  |  |

| **2.3 Parent/Guardian Financial Assessment - Income** |  |  |  |
| --- | --- | --- | --- |
|  | **Person 1** | **Person 2** |
| **Are you Employed?**  | **🞏 Yes 🞏 No** | **🞏 Yes 🞏 No** |
| **If yes, please provide your P60**  |

|  |
| --- |
| **Please tick the relevant box(es) to indicate any benefit(s) you receive** |
| **Benefit Received** | **Income Support** | **Job Seekers Allowance (JSA)** | **Employment Support Allowance** | **Housing Benefit** | **Council Tax Benefit** | **Universal Credit** | **Carer’s Allowance** |
| **Person 1** |  |  |  |  |  |  |  |
| **Person 2** |  |  |  |  |  |  |  |

| **2.4 Parent Guardian Financial Assessment – Other Income** |  |
| --- | --- |
| **Other Income Received** | **Working Tax Credit** | **Child Tax Credit** | **Employment Support Allowance *and* Disability Living Allowance** | **Other ~ please specify**  |
| **Person 1** |  |  |  |  |
| **Person 2** |  |  |  |  |
| **Student** |  |  |  |  |

| **3.1 Evidence** |  |  |
| --- | --- | --- |

**The information declared in Sections 2.3 and 2.4 on page 2 must be supported by evidence for an assessment to be made. Photocopies *are not* acceptable.**

**The table below illustrates the evidence you will need to provide with your application form.**

|  |  |
| --- | --- |
| **Type of Income** | **Evidence Required** |
| **Annual Salary** | **P60 for the tax year to 5 April 2021, or week 52 payslip (final payslip in March 2021) or month 12 (March 2021) payslip** |
| **Income Support** | **Entitlement / Award Letter – dated within the last three months** |
| **Job Seekers Allowance (JSA)** | **Entitlement / Award Letter – dated within the last three months** |
| **Employment Support Allowance (ESA)** | **Entitlement / Award Letter – dated within the last three months** |
| **Housing Benefit** | **Entitlement / Award Letter – dated within the last three months** |
| **Council Tax Benefit** | **Entitlement / Award Letter – dated within the last three months** |
| **Universal Credit** | **Entitlement / Award Letter – dated within the last three months** |
| **Carer’s Allowance** | **Entitlement / Award Letter – dated within the last three months** |
| **Working Tax Credit** | **Working Tax Credit Award Notice marked ‘2021-22’. Must be for a full year and not partial awards (FULL AWARD NOTICE)** |
| **Child Tax Credit** | **Working Tax Credit Award Notice marked ‘2021-22’. Must be for a full year and not partial awards (FULL AWARD NOTICE)** |
| **Disability Living Allowance** | **Entitlement / Award Letter – dated within the last three months** |
| **Other Income** | **Relevant paperwork** |

| **4.1 State the costs with which you require financial help** |
| --- |
| **Expense** | **Details** | **Amount Requested (£)** |
| **Books, stationery, files, etc. (Receipts required)** |  | **£** |
| **School meals** |  | **£** |
| **Exam fees and resits**  |  | **£** |
| **Transport costs to and from Post 16** |  | **£** |
| **Field trips and course visits** |  | **£** |
| **University open day expenses**  |  | **£** |
| **Other costs (Receipts required)** |  | **£** |
| **TOTAL AMOUNT REQUESTED (£)** **Bursaries are awarded based on the individual circumstances of each student. All awards are dependent on the availability of funding and cannot be guaranteed.** | **£** |

| **5.1 State the costs for which you require financial support** |
| --- |

**I declare that the statements made on this form are true and, to the best of my knowledge and belief, are correct in every respect. I undertake to supply any additional information that may be required to verify the details given. I understand that if I decline to provide information relevant to my claim the application will not be considered. I also undertake to inform the school of any alteration to the particulars in writing. I agree to repay Penistone Grammar Sixth Form College in full, and immediately, any sums advanced to me if the details I have given are shown to be false or deliberately misleading.**

**I am aware that the funding applies to this academic year only and that I must re-apply each year. I accept that a successful application in the current year does not guarantee that I will receive funding in subsequent years.**

**Signed (Student) Date:**

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

| **6.1 PGS Post 16 use only** |
| --- |
| **Date received** |  |
| **Eligibility confirmed** | **🞏 YES 🞏 NO** |
| **Application supported** | **🞏 YES 🞏 NO** |
| **Bursary awarded:** |  |
| **Books, study materials and equipment** | **£** |
| **School meals** | **£** |
| **Exam fees and resits** | **£** |
| **Transport costs to and from college** | **£** |
| **Field trips and course visits** | **£** |
| **University open day expenses** | **£** |
| **Other costs (please specify)** | **£** |
| **Direct to the school** | **LC: 424026 CC: 32013** |
| **Authorised by** |  |
| **Signature** |  |
| **Date** |  |

**Please return your completed form to Ms Kelly, Post 16 Student Support Officer, together with the original supporting documents.**

***All applications and successful bursary awards are confidential.***