

16-19 Bursary Fund Application Form 2022-23

Please complete each section listed below:

- Section 1. Details of applicant
- Section 2. Eligibility Priority
- Section 3. How the funds will be used
- Section 4. Declaration by applicant
- Section 5. To be completed by the Head of College

**PLEASE COMPLETE THIS FORM USING BLOCK CAPITALS AND RETURN BY:
23 September**

Section 1: Details of Applicant		Male <input type="checkbox"/>	Female <input type="checkbox"/>
Full Name: _____	Date of Birth: _____		
Home Address:	Tel:		
	Email:		
Postcode:			
I am living with:	Parents/Carers <input type="checkbox"/>	Independently <input type="checkbox"/>	
Have you right of abode and been resident in the UK for the last 3 years	Yes <input type="checkbox"/>	No <input type="checkbox"/>	

Section 2: Eligibility Priority	
<p>This section will ask you to indicate under which of the 4 agreed categories you wish your application to be considered against. You will also find information about what evidence you will be required to supply to support your application.</p> <p>Please indicate, with a tick in the box next to the description of, the category under which you wish your application to be considered against and confirm that you have provided the evidence required. (Please only put a tick next to one category)</p>	
Category 1:	
<input type="checkbox"/>	I wish my application to be considered under Priority One: <ul style="list-style-type: none"><input type="checkbox"/> Young people in care or recent care leavers living independently<input type="checkbox"/> Young people in receipt of Income Support or Universal Credit<input type="checkbox"/> Disabled young people in receipt of Disability Living Allowance (DLA) in your name and either Employment and Support Allowance (ESA) or Universal Credit<input type="checkbox"/> Young people in receipt of Personal Independence Payment (PIP) in your name and either ESA or Universal Credit
In support of my application I enclose either:	
<input type="checkbox"/>	written confirmation of my current or previous looked-after status from the Local Authority who looked after me, or who provided my leaving care services, or
<input type="checkbox"/>	a letter confirming that I am in receipt of Income Support, Universal Credit or Employment Support Allowance and Disability Living Allowance or Personal Independence Payment

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Category 2:

I wish my application to be considered under Priority Two:
Young people who are claiming, or who are eligible to receive, Free School Meals. To be eligible under this priority, someone in your household must be in receipt of one of the following qualifying benefits:

- **Income Support**
- **Universal Credit**
- **Income Based Job Seekers Allowance**
- **Income Related Employment & Support Allowance**
- **Child Tax Credit**
- **Support under part VI of the Immigration and Asylum Act 1999**
- **Guarantee element of State Pension Credit**
- **Working Tax Credit**

In support of my application I authorise the Education Welfare Benefits Team, who administer Free School Meals, to verify this entitlement through their own records, or through my Academy/School, if they administer their own Free School Meals.

In order for us to confirm and continue to check entitlement to Free School Meals, please ask the person in receipt of a qualifying benefit to complete and sign the declaration below:

Surname:

Date of Birth:

N.I. Number:

I give permission for the Education Welfare Benefits Team (Cambridgeshire LA), to carry out periodic checks, using the secure electronic checking system, to confirm continued entitlement to benefits I receive.

Signature:

Category 3:

I wish my application to be considered under Priority Three:
Young people whose household income is below £25,000 per annum.

In support of my application I enclose the following information:

- A copy of entitlement to means-tested state benefit or Tax Credit Award Notice, confirming household income of less than £25,000, or
- Evidence of self-employment income of less than £25,000 (SA302 or certified accounts only) for your last accounting period

Category 4:

I wish my application to be considered under Priority Four:

Young people who have been affected by a sudden, exceptional change in financial circumstances.

- I have enclosed a detailed statement in support of my application.

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Section 3: How the funds will be used

Please provide details below of how the Bursary funds, if awarded to you, will be used and the amount.

Please note that those students making an application under Category 2 will not normally be eligible to claim funding for meals or transport, as they should be entitled to receive a free school meal at The Oakes College and assistance with transport costs in line with the County Council's Post-16 Transport Policy.

The Bursary will be paid direct to your Bank Account on a half-termly basis subject to attendance and behavior standards as set out and published by The Oakes College.

If you are unsure of any costs related to your course, please speak with your relevant teachers before submitting this application.

Category	Amount (£)
Essential materials related to the course you are following	
Additional course costs, for example: educational trips/visits	
Transport	
Meals	
Other items solely related to the course you are following. Please provide details:	

In order for us to pay the Bursary into Bank Accounts, please provide the **student's** Bank/Building Society details.

Please note: we are unable to make payments into Post Office Accounts

Account Holder's Name:									
Bank/Building Society:									
8 Digit Account Number:	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 12.5%; height: 20px;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> </tr> </table>								
Roll Number if applicable:									
Sort Code:	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 16.6%; height: 20px;"></td> <td style="width: 16.6%;"></td> <td style="width: 16.6%; text-align: center;">-</td> <td style="width: 16.6%;"></td> <td style="width: 16.6%;"></td> <td style="width: 16.6%; text-align: center;">-</td> <td style="width: 16.6%;"></td> </tr> </table>			-			-		
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Section 4: Declaration by Applicant and Parent/Carer:

I confirm that I have read The Oakes College's 16-19 Bursary Policy and Procedure document before submitting this application.

I understand that if I leave before the completion of my programme of study, that I may be required to repay all or part of the amount paid to me under the 16-19 Bursary Fund.

I confirm that I will notify the college of any changes to my financial circumstances, that may affect my entitlement to the Bursary Fund, within 14 working days of those changes taking place.

I understand that my information is being held by The Oakes College Cambridge in accordance with the Data Protection Act (2018) and will be shared with other bodies administering public funds to determine the support available and also for the prevention and detection of fraud in connection with this claim. Bank details are required in order to make Bursary Fund payments. These details will be stored in a secure lockable place and held for 4 years, at which time they will be removed and securely disposed of.

I confirm that the information I have provided on this application is correct and to the best of my knowledge and that any false claims or information will be treated as fraud and dealt with accordingly.

Signed (Student) **Date:**

Signed (Parent/Carer) **Date:**

Section 5: Statement by the Director of College:

I confirm that this applicant meets the residency and eligibility criteria under which a Bursary may be paid.

I confirm that this applicant is enrolled on a programme of study under which a Bursary may be awarded.

I confirm that where this application is to be considered under Priority Four, that I am aware of the sudden and exceptional change of financial circumstances, and that I support this application under this priority.

I confirm that the expenditure detailed in Section 3 is relevant and appropriate for the programme of study being followed by this applicant.

Signed: Date:

Name: Position: **Director of College**

FOR OFFICE USE ONLY:

APPLICATION: **APPROVED**
 REJECTED

Reason for Rejection:

Signed: Date: