**16–19 Bursary Fund Application 2020/2021**

Please read the WMG Academy for Young Engineers 16 – 19 Bursary Fund Guidance Notes 2020/2021 before completing this form.

**Student Details**

|  |  |
| --- | --- |
| Surname |  |
| Forenames |  |
| Address |  |
| Postcode |  |
| Date of Birth |  | Age at 31st August 2020 |
| Telephone Number |  |
| Email Address |  |

**Level Required** – Please tick which level of payment you are applying for:

|  |
| --- |
| **Full Bursary** |
| I am a young person in care |  |
| I am a young care leaver |  |
| I am receiving Income Support, or Universal Credit because I am financially supporting myself or financially supporting myself and someone who is dependent on me and living with me such as a child or partner |  |
| I am receiving Disability Living Allowance or Personal Independence Payments in my own right as well as Employment and Support Allowance or Universal Credit in my own right |  |
| **Discretionary Bursary** |
| I am in receipt of Free School Meals |  |
| My total household income is less than £20,000.00 including benefits  |  |
| My total household income is more than £20,000.00 but less than £25,000.00 including benefits |  |

**Who do you live with?** Please tick all that apply:

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Mother  |  | Father |  | Parents spouse/partner |  | Grandparent(s) |  |
| Foster parents |  | On my own |  | My spouse /partner |  | In care / looked after |  |
| Other, please explain: |  |
| Have you always lived in the UK? | Yes | No(If No, please complete the separate Residency Information sheet attached) |
| Number of dependants in the household? |  |

**Household Income** ***(Required for Discretionary Bursary)***

Please include the required original supporting documentation with this form. All evidence will be photocopied and dealt with strictest confidence. (Please do not send any original documentation in the post. The students should bring this directly to Mrs Kelly in the Admin Office who will photocopy and return ASAP).

|  |  |
| --- | --- |
| My household income is:Please enclose proof eg. P60  | £ |

Please **tick** and enclose **proof**, if you are in receipt of any of the following:

|  |  |
| --- | --- |
| Universal Credit (please print the last 3 months statements from your online account as proof) |  |
| Child Tax Credit |  | Income Support |  |
| Working Tax Credit |  | Employment and Support Allowance |  |
| Support under Part IV of the Immigration and Asylum ACT 1999 |  | Job Seekers Allowance |  |

**Type of assistance requested**

As part of the Bursary Application we need a detailed breakdown of your expected costs for the whole academic year. This is needed for the following reasons;

1. To fully comply with the guidance set by the DfE which states that, “Institutions must ensure they assess the needs of individual students when awarding bursary funding”
2. To ensure we allocate the correct amount of funding expected for the period of study 2020/21.

Please give as much detail as possible in the form below:

|  |  |  |
| --- | --- | --- |
| **Autumn Term** | **Clothing****Books &** **Specialist Equipment** *e.g. A Level textbooks/revision guides, Scientific calculator for A level Maths***Transport costs** (per term)**Meals in school** (if not receiving Free School Meals) |  £ £ £ £ |
| **Spring Term** | **Clothing** **Books & Specialist Equipment** *e.g. A Level textbooks/revision guides, Scientific calculator for A level Maths* **Transport costs** (per term)**Meals in school** (if not receiving Free School Meals) |  £ £ £ £ |
| **Summer Term** | **Clothing** **Books & Specialist Equipment** *e.g. A Level textbooks/revision guides, Scientific calculator for A level Maths* **Transport costs** (per term)**Meals in school** (if not receiving Free School Meals) |  £ £ £ £ |

**Please Note -** Basic stationary supplies can be collected from Mrs Carey as and when needed.

**Bank Account Details**

Where bursary payments are made to a bank account, they should only be made to the student’s bank account. Payments may be made to a joint account, as long as the student is one of the account holders.

You **must** attach an **original account statement or account opening letter** from your bank or building society that shows your name, sort code, account number and home address. Mrs Kelly will photocopy the details and return the original documents. The photocopies will be held in a secure location. Please complete the bank account details required.

**Student Bank or Building Society details**

|  |  |
| --- | --- |
| Full name of Account Holder(This should be as it appears on your cash or debit card, or statement) |  |
| Name of Bank/Building Society |  |
| Branch |  |
| Sort Code | \_\_ \_\_ / \_\_ \_\_ / \_\_ \_\_ |
| Account Number |  |

Your account number many not be the same as the cash or debit card number; you can find it on a bank or building society statement. Most account numbers are 8 digits long. If you are unsure your bank or building society can advise you.

**We confirm that the details provided to support this application for the 16-19 Bursary are true and accurate. We understand that the above named student must comply with the terms of WMG Academy for Young Engineers Solihull Bursary Application and Payment Procedure, and that funds may be withheld if they fail to do so. We understand that we must notify Mrs Carey immediately if there are any changes in financial circumstances to ensure that funding is paid at the correct level.**

Signed (Student) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signed (Parent/Carer) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |
| --- |
| **WMG Academy Use Only** |
| Date application received |  | Supporting documentation provided, photocopied and returned |  |
| Date application reviewed |  | Signed | Vulnerable/Discretionary Amount awarded | £ |

|  |
| --- |
| **RESIDENCY INFORMATION** 2020/2021 ACADEMIC YEAR  |
| **This form must be completed when learners indicate on the application form that they have not always lived in the UK.** |
| **PROTECTION OF PUBLIC FUNDS**We must protect the public funds we handle and so we may use the information you have provided on this form to prevent and detect fraud. We may also share this information, for the same purposes, with other organisations that handle public funds, and with this in mind, a sample of applications will be chosen at random for full investigation.**DATA PROTECTION**The data controller is Coventry City Council. The data you provide to Student Finance will be used to assess and facilitate your entitlement to help from the Schools Sixth Form Learner Support Fund. Coventry City Council, in fulfilling its data protection obligations will treat all personal data, held manually and on a computerised Learner Support Fund database with due care, and will only disclose data in accordance with the Data Protection Act 1998 |
|  |
| Surname/Family name |  |
|  |
| First name(s) |  |
|  |
| When did you enter the UK?  |  |
|  |
| Where did you live before you came to the UK? |  |
|  |
| Why did you come to the UK? |  |
|  |
|  |
|  |
|  |
|  |
| What is your current status (or that of your parents) in the UK? |
|  |
| Refugee status |  |  |
|  |
| Indefinite leave to remain |  | **Please provide copies of your passport and any Home Office papers.** |
|  |
| Leave to remain until \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |  |
|  |
| Asylum Seeker |  |  |
|  |
| European Economic Area Migrant Worker |  |  |
|  |
|  |
| **Declaration by Learner** * The information I have given on this form is accurate.
* I will inform you immediately of any change in either my own or my family's personal circumstances as they occur.
* I understand that if I provide false or incomplete information I will have to repay any money given to me to help me study

Signed : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  |

**16 - 19 Bursary Fund**

**Further Grants of Money Application Form**

If applying for a further grant of money from the Discretionary Bursary please complete this form and return with receipts to Mrs Kelly each term.

**Student Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

|  |  |  |
| --- | --- | --- |
| **Reason for claim**  | **Cost** | **Receipts attached**  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

**Further copies of this form can be requested from Mrs Kelly in the Admin Office.**

**Office use only**

|  |  |  |  |
| --- | --- | --- | --- |
| **All receipts attached** | **Review date**  | **Approved**  | **Sign and date**  |