**16 to 19 Bursary Fund Application: Defined Vulnerable Groups Bursary**

Defined Vulnerable Group Bursary: for students in financial need who are in care, care leavers, students receiving Income Support (or Universal Credit) in their own name and disabled students in receipt of both Employment Support Allowance and Disability Living Allowance or Personal Independence payments.

Please read the bursary fund policy carefully before completing and submitting your application.

**Section A (to be completed by the student)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Student’s full name: |  | Tutor Group: | |  |
| Student’s full address including postcode: |  | | | |
| Contact telephone number: |  | | | |
| School e-mail address: |  | | | |
| I wish to claim support from the 16 to 19 Defined Vulnerable Group bursary fund, and I provide the following information as evidence of **my personal circumstances** (please tick as appropriate and attach documentary evidence) | | | | |
|  | | | *Tick as appropriate* | |
| Written Local Authority evidence of looked-after or care status, or of previous looked-after status. | | |  | |
| For students in receipt of Income Support who are financially supporting themselves / and someone who is dependent on them, a copy of the award notice in their own name. | | |  | |
| For students in receipt of Universal Credit who are financially supporting themselves / and someone who is dependent on them who is living with them, a copy of the award notice in their own name, plus a tenancy agreement in the student’s name, a child benefit receipt, a child benefit receipt, child(ren)’s birth certificate, utility bills etc. | | |  | |
| For students in receipt of Universal Credit or Employment and Support Allowance in their own right, a copy of the claim / award notice, plus evidence of receipt of Disability Living Allowance or Personal Independence Payments. | | |  | |
| Other relevant financial evidence relating to household income or circumstances (please specify). | | |  | |
| Information provided is for this purpose only and will be treated in the strictest confidence. | | | | |

|  |  |  |
| --- | --- | --- |
| Please detail what financial support you need and the costs applicable to the best of your knowledge when submitting the claim e.g., travel, essential books, equipment or specialist clothing (such as protective overalls, for example). Try here to be as specific as possible as per the guidance given above (e.g., the subject(s) involved). | Requested Amount | Agreed Amount |
| Travel (attach receipts to support your estimate). |  |  |
| Business Attire |  |  |
| Textbooks and Academic resources |  |  |
| Contribution towards a laptop / required electronic equipment |  |  |
| Specific course software |  |  |
| Other |  |  |
| Total costs applicable: | £ | £ |

***NB: For audit purposes all receipts, invoices, etc must be filed with this claim to verify payment.***

|  |  |
| --- | --- |
| **I confirm that I have read the school’s 16-19 Bursary Fund Policy and the information provided on this form is correct.**  **I understand that any false information given, or failure to notify the Sixth Form administrator of a change in personal circumstances, will result in disqualification of support, and may result in further action.**  **I understand that I may have to repay part, or all of this assistance offered if my attendance, conduct, or progress is not satisfactory.**  **I confirm I consider myself / my child to be in financial need.** | |
| Student signature: | Date: |
| Parent/Guardian signature: | Date: |

**Section B (to be completed by Bursary Fund Administrator)**

|  |  |
| --- | --- |
| I have seen the evidence required for the 16-19 Vulnerable bursary and have placed copies on the student’s files. | |
| Bursary Committee members in attendance: | Date of meeting: |
| Award approved / amount: |  |
| Administrator name and signature: | Date: |
| Finance authorisation: | Date: |

* **Data Sharing**

The information provided to Bacons College will be used to process Sixth Form Bursary applications. We may share the information provided with other bodies responsible for auditing or administering public funds, or to undertake local anti-fraud initiatives. In addition, we may share the information with third parties such as the Academy’s Local Authority/Council departments, Government departments or other local authorities.  For further information on data sharing, and our full Privacy Policy, please visit our website.  

* **Data Controller**

The Data Controller for personal information held by the Group’s Academies is United Learning Trust (ULT). ULT is registered with the ICO under registration number Z7415170. The Company Secretary, Alison Hussain, is responsible for ensuring that the group complies with the Data Protection Law. She can be contacted on [company.secretary@unitedlearning.org.uk](mailto:company.secretary@unitedlearning.org.uk) or 01832 864538.