



16 – 19 BURSARY APPLICATION FORM

For 16 – 19 year old students

Please complete this form and return to a member of the Sixth Form team

Section 1: Personal Details

First names:	
Surname:	
Date of birth (DD/MM/YY)	
Full term time address	
Home telephone number:	
Mobile telephone number	

Section 2: Priority Group (student)

Please tick yes or no to the following statements: Please supply original documents to support eligibility, these will be photocopied and returned to you.

I am in care/classed as Looked After Child by my Local Authority Y N	
I have been in care and am now classified as a 'Care Leaver' Y N	
I am in receipt of Income Support Y N	
I am in receipt of Employment and Support Allowance (ESA) or Universal Credit Y N	
Disability Living Allowance (DLA) Y N	
I was in receipt of Free School Meals in Year 11	

Section 3: Priority Group (Parent/s)

Please tick yes or no to the following statements:

My parent/guardian is receipt of Income Support Y N	
My parent/guardian is receipt of Job Seekers Allowance Y N	
My parent/guardian is receipt of Child Tax Credit Y N	
I am in receipt of Employment and Support Allowance (ESA) or Universal Credit Y N	
My parent/guardian is in receipt of Working Tax Credit Y N	
My parent/guardian is in receipt of guaranteed pension credit Y N	

Section 4: Funding request

Please detail for what specific purpose you are applying for financial support through the 16-19 Bursary Scheme for (refer to the policy):

Item (transport/uniform/equipment/trip etc)	Cost
Total Cost	



Section 4: Additional information

Please indicate below any additional information you feel is relevant to your request

Section 5: Declaration

I declare that the information I have given on this form is accurate to the best of my knowledge

Student's signature	
Date	

Section 6: Student's Bank/Building Society Details

Name of Bank/Building Society	
Sort Code	
Account Number	

16-19 Bursary payments will be made directly into the account stated above

Section 7: Evidence

For St George's school use only

Evidence received and attached to this form Y N	
Approved Y N	
School signature Date	

