

# THEALE GREEN SCHOOL

## 16-19 Bursary Fund 2023/24

### Application Form

#### Section 1: Young Person Details

<b>Unique Reference Number</b> <input style="width: 90%;" type="text"/>	<b>Tutor</b> <input style="width: 90%;" type="text"/>
<b>Surname</b> <input style="width: 90%;" type="text"/>	<b>Forename</b> <input style="width: 90%;" type="text"/>
<b>Home address</b> <input style="width: 95%;" type="text"/> <input style="width: 95%;" type="text"/> <input style="width: 95%;" type="text"/> <input style="width: 95%;" type="text"/>	<b>Male</b> <input type="checkbox"/> <b>Female</b> <input type="checkbox"/> <b>Other</b> <input type="checkbox"/> <b>Date of Birth</b> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <b>Age on 1st September 2023</b> <input style="width: 40px;" type="text"/> <b>Home Telephone Number</b> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <b>Mobile Telephone Number (if applicable)</b> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
<b>Postcode</b> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	

**Do any of these apply to you? (tick all those that apply)**

I am living independently <input type="checkbox"/> I do not live with my parent(s) <input type="checkbox"/> I am a parent <input type="checkbox"/> I or my sibling(s) in receipt of Free School Meals <input type="checkbox"/> I am receiving Disability Living Allowance <input type="checkbox"/> I receive another Financial Benefit (please state below) <input type="checkbox"/> <input style="width: 800px;" type="text"/>	I am a looked after young person <input type="checkbox"/> I have been a looked after young person <input type="checkbox"/> I am living in hostel accommodation <input type="checkbox"/> I consider myself disabled <input type="checkbox"/> I receive Income Support in my name <input type="checkbox"/> I am receiving Employment Support Allowance <input type="checkbox"/>
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#### Section 2: Residency Status (tick all those apply)

British Citizen <input type="checkbox"/>	EU/EEA Citizen <input type="checkbox"/>	Asylum Seeker <input type="checkbox"/>	Refugee/Indefinite Leave to Remain <input type="checkbox"/>
Humanitarian Protection <input type="checkbox"/>	Discretionary Leave to Remain <input type="checkbox"/>	National Asylum Support System (NASS) <input type="checkbox"/>	

#### Section 3: Programme of Study

Year Group	<input type="text"/>	Programme of Study (A level / BTEC)	<input style="width: 95%;" type="text"/>
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<b>Subjects</b>	1	2
	3	4
	5	6

#### Section 4: Parent/Guardian/Carer(s) Details (to be completed by parent/guardian/carers)

Adult 1	Mr	Mrs	Ms	Miss	Adult 2	Mr	Mrs	Ms	Miss
Full Name					Full Name				
Home address (if different from young person)					Home address (if different from young person)				
Postcode					Postcode				
Home Telephone Number					Home Telephone Number				
Mobile Telephone Number (if applicable)					Mobile Telephone Number (if applicable)				
Relationship to young person					Relationship to young person				

#### Section 5: Income Information (to be completed by parent/guardian/carers)

Do you receive any of the following?	Adult 1	Adult 2	(evidence <u>must</u> be provided)	Adult 1	Adult 2
Income Support			Universal credit		
Income-based Jobseekers Allowance			Pension Credit		
What was your total household income for the Tax Year 2022-2023				£	

#### Section 6: Bursary being applied for

Guaranteed		Discretionary		Exceptional*		*please enclose a covering note outlining your needs
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#### Section 7: Parent/Guardian/Carer(s)/Young Person Declaration

I confirm that the information given on this application form is true and correct

Adult 1 Signature		Date							
Adult 2 Signature		Date							
Young Person Signature		Date							

#### Section 8: FOR SCHOOL OFFICE USE ONLY

Date Application Checked							Checked by	
Application Complete?			Evidence Submitted?			More information needed?		

**Declaration Slip**

I can confirm that the evidence we have provided on the bursary application is correct to the best of our knowledge and belief. Please be aware that giving false or incomplete information that leads to incorrect/overpayment may result in future payments being stopped and any incorrectly paid funds being recovered. There is also the possibility that fraudulent applications could result in a referral to the police with the possibility of prosecution.

Student Name: .....

Name of Parent / Carer: .....

Parent / Carer Signature: .....

Date:.....