



# The Thomas Hardy School Sixth Form

## Application for Bursary/Free School Meals 2018-19

PLEASE RETURN THE COMPLETED APPLICATION TO MRS BUCK IN THE 6<sup>TH</sup> FORM ATTENDANCE OFFICE

PERSONAL DETAILS	
Student Name:	Tutor Group:
Date of Birth:	Age as at 31 August 2018:
Address:	
Home Tel:	Student Mobile:
Student Email:	
I am applying for: (Please tick required option and complete the appropriate section indicated)	
<input type="checkbox"/> Vulnerable Student Bursary (Band 1) – Section 1	
<input type="checkbox"/> Discretionary Bursary including a Free School Meal (Band 2) – Section 2 (Gross household income below £16,190 and in receipt of Child Tax Credits)	
<input type="checkbox"/> Discretionary Bursary including a Free School Meal (Band 2) – Section 2 (Net household income under £7,400 and in receipt of Universal Credit)	
<input type="checkbox"/> Discretionary Bursary (Band 3) – Section 2 (Gross Income £16,161 to £20,000)	
<input type="checkbox"/> Discretionary Bursary (Band 4) – Section 2 (Gross Income £20,001 – £25,000)	
<input type="checkbox"/> Educational Support Grant - Sections 2 and 3	
<b>NB Please provide as much supporting documentation as possible. A decision can be reached more quickly when full information is made available.</b>	

6 <sup>th</sup> FORM USE ONLY	
Date Received	
Evidence Provided	
Bursary Decision	

**SECTION 1**

**APPLICATION FOR VULNERABLE STUDENT BURSARY (BAND 1)  
Please tick as appropriate (Statements relate to student only)**

- I am currently in Local Authority Care
- I am currently living independently having left Local Authority Care
- I am currently in receipt of Income Support/Universal Credit and financially supporting myself and/or a dependent (ie child or partner)
- I am in receipt of Disability Living Allowance or Personal Independence Payments **and** Employment Support Allowance or Universal Credit in my own right

**Please provide written evidence of circumstances to support your application**

**SECTION 2**

**APPLICATION FOR DISCRETIONARY BURSARY (Bands 2, 3 or 4) or  
FOR AN EDUCATIONAL SUPPORT GRANT –  
Please tick as appropriate**

- I received Free School Meals during Year 11/Year 12 during the 2017/18 Academic Year

My family receives benefits as indicated below ***(Please provide evidence):***

- Income Support
- Child Tax Credit
- Working Tax Credit
- Job Seekers' Allowance
- Universal Credit -

Please indicate which benefit(s) this replaces: .....

.....

- Pension Guarantee Credit
- Employment and Support Allowance
- Support under Part IV of the Immigration and Asylum Act 1999

**IMPORTANT:** *Please ensure that **full** copies of Tax Credit/Universal Credit awards, or other supporting documents, are provided with this application as partial copies will be returned, potentially delaying payment.*

*The more accurate picture of financial circumstances provided, the easier it will be for a decision to be reached on the level of bursary granted.*

**SECTION 3**

**SUPPORTING INFORMATION FOR APPLICATION FOR AN EDUCATIONAL SUPPORT GRANT**

Please provide details of reason for application and evidence of income to support the claim (***Tax Credit/Universal Credit awards, P60, etc***) indicating amount required and purpose it will be used for:

**ALL APPLICANTS:**

Please do not make purchases/bookings before assistance is approved. Where appropriate receipts may be required.

Please indicate number of Dependent Children in the family unit who are living in the same household:	
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**SUBJECT(S) TO BE STUDIED**

<b>1.</b>	<b>2.</b>	<b>3.</b>
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**METHOD OF TRAVEL TO/FROM THE THOMAS HARDYE SCHOOL**

**ESTIMATED COST (£)**

For those travelling from Bridport/Weymouth/Portland a contribution can be given towards an annual Bus Pass for First Bus. The pass allows travel at weekends and during school holidays in addition to travel to and from school. Applications for the pass can be obtained from the school office.

**DECLARATION**

I/We declare that the information given in support of this application is correct and complete to the best of my/our knowledge and belief.

I/  M  W for  le  e  m  a  r  School immediately of any change of circumstances, at any time, which may affect my entitlement to support (for example if I leave school or parents' income changes.

I/We understand that this information will not be shared with third party organisations, except for audit purposes.

I/We understand that poor attendance (unauthorised absence), non-compliance with the Sixth Form Agreement, receipt of a Formal Warning may result in the loss of financial support.

I/We understand that awards made are subject to the school being in receipt of sufficient funds from the Education Funding Agency.

Student Signature: ..... Date: .....

Parent/Guardian/  
Responsible Adult Signature: .....

Please Print Name: ..... Date: .....

**STUDENT'S BANK ACCOUNT**

**(Payments will be made directly to the student by BACS transfer)**

Name of Bank:

Branch:

Student Account Title (ie Mr J Doe):

Sort Code:

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Account No:

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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**Please remember to inform Mrs Buck if bank account details change through the course of the school year.**