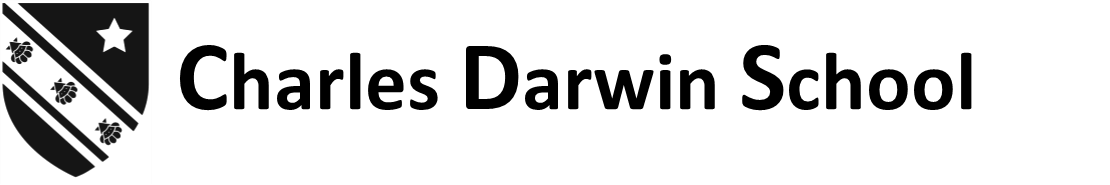
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**Form B**

**16-19 Bursary Fund Application Form**

**Form B**

**To be completed by the parent/carer:**

**Student’s details:**

|  |  |
| --- | --- |
| **Surname** |  |
| **Forename** |  |
| **Form** |  |
| **Date of Birth** |  |

**Parent/Carer’s details:**

|  |  |
| --- | --- |
| **Parent/Carer’s full name** |  |
| **Address 1** |  |
| **Address 2** |  |
| **Town** |  |
| **County** |  |
| **Postcode** |  |
| **Telephone** |  |

|  |  |
| --- | --- |
| **Relationship to student:** |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Does the above-named student live with you at the address given?** | Yes\* | 🞏 | No | 🞏 |
| \* Supporting documentation enclosed | Yes | 🞏 | No | 🞏 |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Are you currently receiving Income Support or other means-tested benefits e.g. Disability Living Allowance, Universal Credit, Working Tax Credit, Child Tax Credit?** | Yes\* | 🞏 | No | 🞏 |
| \* Supporting documentation enclosed | Yes | 🞏 | No | 🞏 |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Does the above-named student receive Free School Meals?** | Yes\* | 🞏 | No | 🞏 |
| \* Supporting documentation enclosed | Yes | 🞏 | No | 🞏 |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Specific requests e.g. school trip, subject specific equipment, etc (please attach list detailing costs)** | Yes\* | 🞏 | No | 🞏 |
| \* Supporting documentation enclosed | Yes | 🞏 | No | 🞏 |

|  |
| --- |
| **All supporting documentation must be current.** |

Continued overleaf/…

**Student Declaration:**

I understand that any bursary I may receive is dependent on meeting the following conditions:

* I must not have unauthorised and unexplained absence or lateness from lessons or from school.
* I must have over 96% attendance and be punctual at all times.
* I must be up to date with all subject work and hand in all coursework on time.
* I must show the required commitment to my studies at all times.
* I must sit all my examinations.

I understand that if I fail to meet these conditions, my bursary payment will be reduced or withdrawn. The information on this form is correct and to the best of my knowledge.

|  |  |
| --- | --- |
| **Student name** |  |
| **Student signature** |  |
| **Date** |  |

|  |
| --- |
| **Please submit applications and supporting documentation to Mrs Johnson, KS5 Pastoral Support Manager, marked Bursary Fund Application, before the deadline of Friday, 29 September 2023. If your circumstances change you should inform the school immediately, so that an adjustment may be considered** |

Any information given to the school will only be used for the purpose of processing your application for the 16‑19 Bursary Fund. We are under a duty to protect the public funds we handle and may use the information you provide to prevent and detect fraud. We may also share this information for the same purposes, with other organisations which handle public money.

**Charles Darwin School**

**Bank Mandate Form**

Please complete this form and return to the 16-19 Bursary Fund Administration as soon as possible, together with the completed application form.

|  |  |
| --- | --- |
| **Name of student** |  |
| **Address** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_    \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Postcode: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Date of Birth** |  |

|  |  |
| --- | --- |
| **Student’s own bank account details must be provided**  **(as detailed under EFA guidelines):** | |
| **Bank Name** |  |
| **Account Name of student** |  |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Sort Code** |  |  | **-** |  |  | **-** |  |  |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Account number** |  |  |  |  |  |  |  |  |

|  |  |
| --- | --- |
| **Student signature** |  |
| **Date** |  |