

## Castle School Bursary Fund Application Form

Student Name:	
Address:	
Postcode:	
Date of birth:	

Bursary applied for:

### Category A: Vulnerable

Please tick any boxes, which apply.

- Student is personally in receipt of income support or Universal Credit
- Student is personally in receipt Personal Independence Payment (PIP) and Employment and Support Allowance (ESA) or Universal Credit and Disability Living Allowance
- Student is in care, was previously a looked after child or is a recent care leaver
- Student is in receipt of Disability Living Allowance and Employment and Support Allowance (ESA) or Universal Credit and Disability Living Allowance

Please provide evidence to support the statement ticked above.

### Category B: Discretionary Awards

This category is targeted for any students facing financial barriers in meeting essential costs e.g., transport, meals, books and equipment.

Please tick which award you are applying for.

- Category B (i): Initially maximum grant of £500, for students where gross annual household income does not exceed £25,500 per annum.
- Category B (ii): Initially maximum grant of £300, for students eligible for free school meals and/or previously eligible for Pupil Premium to make a claim.

Discretionary Bursary Awards are conditional upon:

- Attendance above 90%.
- Following the Castle School code of conduct

For Category B (i) please tick the evidence provided:

- 3 most recent Universal Credit monthly award statements
- P60 (tax year ended 5th April 2023)
- Evidence of self-employment income (tax year ended 5th April 2023)
- Last 3 months Payslips for all household adults
- Other benefits/pension award letter

## 16-19 Bursary Fund Policy

For Category B (ii) please tick the relevant statement:

Student is eligible for Free School Meals

Student was eligible for 'Pupil Premium' in Year 11.

The student or family currently face exceptional circumstances (please attach a letter of explanation).

**Category B Amount requested £** \_\_\_\_\_

Category	Amount £	Details (attach receipts)
Books/Equipment		
Transport		
Meals		
Additional course costs (e.g. trips)		
Exam re-sit fees		
Other (please specify)		

### Bank account details for payment:

Bank:	
Account holder name:	
Sort code:	
Account Number	

I confirm that the information provided in this form and the accompanying evidence are true and accurate. I understand that the information provided may be shared with other departments within the school, including the Finance department.

Signed (student / parent or Carer): \_\_\_\_\_ Date: \_\_\_\_\_

## 16-19 Bursary Fund Policy

For Internal Use – confirmation of eligibility:

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Position: \_\_\_\_\_

### For finance use only:

<i>Maximum Fund £</i>	<i>Claimed to date: £</i>
<i>Amount of this claim £</i>	<i>Balance remaining £</i>