

## Protection of Public Funds

We must protect the public funds we handle and so we may use the information you have provided on this form to prevent and detect fraud. We may also share this information, for the same purposes, with other organisations that handle public funds, and with this in mind, a sample of applications will be chosen at random for full investigation.

## Data Protection

The data you provide to Lammas School will be used to assess and facilitate your entitlement to help from the 16-19 Bursary Fund. Lammas School, in fulfilling its data protection obligations will treat all personal data, held manually and on a computerised database with due care, and will only disclose data in accordance with the Data Protection Act 1998

### SECTION A: PERSONAL DETAILS

Surname/Family Name: \_\_\_\_\_

First Name(s): \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Present Home Address (If your address changes please notify us):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Telephone Number: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

### SECTION B: COURSE DETAILS

Name of School:

\_\_\_\_\_

Course Name and Description:

\_\_\_\_\_

Which year will you be in?

\_\_\_\_\_

### SECTION C: LEARNER'S CIRCUMSTANCES

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Who do you live with? Please tick all that apply:

- Mother     Father     Parent's Spouse/ Partner     Grandparent(s)     Foster  
Parents

- On My Own     My Spouse/Partner     In Care/ Looked After     Other, Please Explain:

Have you always lived in the UK?     Yes     No

## SECTION D: LEARNER INCOME

Part Time    £ \_\_\_\_\_ weekly  
Job:

Benefits:    £ \_\_\_\_\_ weekly

Other:    £ \_\_\_\_\_ weekly

## SECTION E: SUPPORT REQUIRED

I am applying for the 16-19 Bursary because I need help with the following:

- Books/Equipment     Travel     Examination/Registration Fees  
 Field Trips      
Other \_\_\_\_\_

Please full provide details of the support required and likely costs below:

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SECTION F: PLEASE TICK BELOW ONE OR ALL THAT APPLY -EVIDENCE MUST BE SUPPLIED	
<input type="checkbox"/> A – I am, or my family are, in receipt of Free School Meals	We will check your details with the School Benefits section
<input type="checkbox"/> B – I am, or my family are, in receipt of Asylum Seeker Funding from the Home Office	Please provide proof e.g. Home Office Letter
<input type="checkbox"/> C – I am, or my family are, in receipt of Income Support/Universal Credit	Please provide proof e.g. current benefits letter/books or bank statement
<input type="checkbox"/> D – I am a looked after child	Please provide a letter from your social worker
<input type="checkbox"/> E – Family’s gross taxable income is less than £20,000 a year	Please provide a copy of the Tax Credit Award notice and/or bank statements
<input type="checkbox"/> F – I am a care leaver	Please provide a letter from your social worker
<input type="checkbox"/> G – I am disabled and in receipt of Employment Support Allowance and Disability Living Allowance or Personal Independence Payment	Please provide proof e.g. benefits books or bank statement
<input type="checkbox"/> H – I am a parent of a child	Please provide proof e.g. birth certificate or family allowance letter for the child

**SECTION G: HOUSEHOLD INCOME**  
Please complete this section if you have ticked box E above and do not have an up to date Tax Credit Award notice

	Parent 1	Parent 2	Evidence
Gross Taxable Annual Salary/ Wages	£	£	P60 or Payslip
Self-Employment/Property Income	£	£	Self-Assessment tax Calculation or Certified Accounts
Private/Occupational Pension	£	£	Pension Statement/Pension P60 /Bank Statement
State Pension	£	£	Pension Statement/Bank Statement/Benefit Book
Share Dividends	£	£	(Evidence only required if over £250.00 for the year) Tax Vouchers
Bank or Building Society Interest	£	£	(Evidence only required if over £250.00 for the year) Bank/Building Society Statement
Benefits (Please specify) _____	£	£	Bank Statement/Benefit Book

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Other Income/Benefit Payments Received (Please Specify Here) _____ _____ _____	£	£	Bank Statement/Benefit Book/Benefits Letter
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## SECTION H: BANK DETAILS

Account Number: \_\_\_\_\_ Sort Code: \_\_\_\_\_

Name of Bank plc: \_\_\_\_\_ Account holder name: \_\_\_\_\_

## SECTION I: DECLARATION BY PARENT OR GUARDIAN

It is important that you read the following statement carefully. We will not consider this application unless it is signed and dated by the family members whose income details have been declared above in Section G.

- The information I have given on this form is accurate.
- I will inform you immediately of any change in my personal circumstances as they occur.
- I understand that if I provide false or incomplete information, I will have to repay any money given to the applicant to help with their study.

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

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

## SECTION J: DECLARATION BY LEARNER

It is important that you read the following statement carefully. We will not consider this application unless it is signed and dated by you.

- The information I have given on this form is accurate.
- I will inform you immediately of any change in either my own or my family's personal circumstances as they occur.
- I understand that if I provide false or incomplete information I will have to repay any money given to me to help me study

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