

**Bursary Application 2021-22**

## 

|  |  |  |
| --- | --- | --- |
| **PERSONAL DETAILS** | | |
| Student Name: | | Tutor Group: |
| Date of Birth: | Age as at 31 August 2021: | |
| Address: | | |
| Home Tel: | Student Mobile: | |
| Student Email: | | |
|  | | |
| I am applying for:  (Please tick required option and complete the appropriate section indicated)  Band 1 – High Priority Bursary – Complete Section 1  Band 2a - Discretionary Bursary including a Free School Meal – Complete Section 2 (Gross household income below £16,190 and in receipt of Child Tax Credits)  Band 2b - Discretionary Bursary including a Free School Meal – Complete Section 2 (Net household income under £7,400 and in receipt of Universal Credit)  Band 3 - Discretionary Bursary – Section 2 (Gross Income £16,191 to £20,000)  Band 4 – Discretionary Bursary – Section 2 (Gross Income £20,001 – £25,000)  Band 5 - Educational Support Grant - Complete Sections 2 and 3  **NB: Please provide as much supporting documentation as possible enabling a prompt decision to be made** | | |

|  |  |
| --- | --- |
| **6th FORM USE ONLY** | |
| Date Received |  |
| Evidence Provided |  |
| Bursary Decision |  |

|  |  |
| --- | --- |
| **SECTION 1**  **APPLICATION FOR HIGH PRIORITY 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 (i.e. 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, 4 or 5)**  **Please tick as appropriate** |
| I received Free School Meals during Yr 11/Yr 12 during the 2021/22 Academic Year |
| My family receives benefits as indicated below ***(Please provide evidence of each benefit):***  Income Support (Latest award letter) Child Tax Credit (Latest award letter) Working Tax Credit (Latest award letter)  Job Seekers’ Allowance (Latest award letter)  Universal Credit (at least 3 months most recent award statements) -  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  Please attach Proof of Earned Income, i.e. most recent P60  Please tick box if self-employed: (include evidence of any Company Dividends received)  ***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.* |
| **All paperwork supplied will be returned.** |

|  |
| --- |
| **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: |

|  |  |
| --- | --- |
| **METHOD OF TRAVEL TO/FROM MAGNA ACADEMY** | **ESTIMATED COST (£)** |
|  |  |

**ALL APPLICANTS:**

Applications should be submitted no later than **Monday 13th September 2021.**

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:

|  |  |  |
| --- | --- | --- |
| **SUBJECT(S) TO BE STUDIED** | | |
| **1.** | **2.** | **3.** |

|  |  |  |
| --- | --- | --- |
| **STUDENT’S BANK ACCOUNT DETAILS**  **(Payments will be made directly to the student by BACS transfer)** | | |
| Name of Bank: | | Branch: |
| Student Account Title (i.e. Mr J Doe): | | |
| Sort Code: | Account No: | |
| **Without this information bursaries cannot be paid.** | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |

|  |
| --- |
| **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/We will inform Magna Academy 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: ...................................... |