## 16-19 Bursary Application 2024-25



remains at the correct level.

**Student Signature** 

**Parent/Carer Signature** 



Prior to completing this form, please refer to the 'Spalding High School 16-19 Bursary Policy'.

Proof of entitlement must be included when the form is returned to the Sixth Form Administrator.

## **Student Details**

Surname First Names Date of Birth

**Address** 

Postcode	
Parent/Carer Details	
Surname	
First Names	
Date of Birth	
Address	
Postcode	
National Insurance Number	
Household Income (please supply the required evidence to support this claim.  This will be in strict confidence)	

We confirm that the details provided to support this application for the 16-19 Bursary are true and accurate. We accept that the student named above must comply with the terms of the Spalding High School Bursary Fund Policy or funding may be withdrawn. We understand that any and all changes in financial circumstance must be immediately reported to the Sixth Form Administrator to ensure funding

**Date** 

**Date** 

## 16-19 Bursary Application 2024-25





	gh School 16-19 Bursary Policy 202 lease tick the box to confirm.	4-25' that explains the amount of fundi	ing
Please indicate the level of sup	port you are applying for and the	reason why:	
LEVEL 1 SUPPORT	LEVEL 2 SUPPORT	LEVEL 3 SUPPORT	
I am living in care I am a care leaver	Gross household income is less than £21,000	I have an identifiable financial need and wish to apply for a discretionary Bursary	
I am in receipt of Income Support or Universal Credit	I am in receipt of Free School Meals		
I am in receipt of both Employment Support Allowance and Disability Living Allowance or Personal Independence Payment	My household is in receipt of means tested benefits		
	evidence required to suppo Please provide copies of ori	Please refer to the 16-19 Bursary Policy for the proof of income evidence required to support your application. Please provide copies of original documents (or photos by email). Original documents can be returned to you on request.	
Please provide brief details of t	the items for which you will requir	e support. (Use additional sheet if nec	essary
Transport requirements			
School trips/visit requiremen	nts		
Equipment/resources			
Any other items			