



Confidential

Haberdashers' West Midlands Academies Trust

16-19 Bursary application form

Haberdashers' Adams

Form	<input type="text"/>	Tutor	<input type="text"/>
Surname	<input type="text"/>	Forename	<input type="text"/>
Home address	<input type="text"/>		
	<input type="text"/>		
	<input type="text"/>		
Postcode	<input type="text"/>	Gender	<input type="text"/>
	<input type="text"/>	Date of Birth	<input type="text"/>
	<input type="text"/>	Current Age	<input type="text"/>
	<input type="text"/>	Home Telephone Number	<input type="text"/>
Email address:	<input type="text"/>	Mobile Telephone Number (if applicable)	<input type="text"/>
Do any of these apply to you? (tick all those that apply)			
I am living in care	<input type="checkbox"/>	I am a care leaver	<input type="checkbox"/>
I or my sibling(s) are in receipt of Free School Meals	<input type="checkbox"/>	I receive Income Support	<input type="checkbox"/>
I am receiving Disability Living Allowance or PIP	<input type="checkbox"/>	I am receiving Employment Support Allowance	<input type="checkbox"/>
I am receiving Universal Credit	<input type="checkbox"/>	I am a looked after young person	<input type="checkbox"/>

Section 2: Residency Status

Please tick to confirm you meet the residency criteria for ESFA funding.

☐

Section 3: Programme of Study

Year Group	<input type="text"/>	Programme of Study (e.g. AS/A2)	<input type="text"/>
Subjects	1 <input type="text"/>	2 <input type="text"/>	
	3 <input type="text"/>	4 <input type="text"/>	
	5 <input type="text"/>	6 <input type="text"/>	

Section 4: Parent/Guardian/Carer(s) Details (to be completed by parent/guardian/carers)

Adult 1	Mr		Mrs		Ms		Miss		Adult 2	Mr		Mrs		Ms		Miss	
Full Name									Full Name								
Home address (if different from young person)									Home address (if different from young person)								
Postcode									Postcode								
Home Telephone Number									Home Telephone Number								
Mobile Telephone Number (if applicable)									Mobile Telephone Number (if applicable)								
Relationship to young person									Relationship to young person								

Section 5: Income Information (to be completed by parent/guardian/carers)

Do you receive any of the following?	Adult 1	Adult 2	(evidence <u>must</u> be provided)	Adult 1	Adult 2
Income Support			Universal Credit (last 3 award statements)		
Working or child tax credits			Pension Credit		
What was your total household income for the last Tax Year?			£		

Section 6: Bursary being applied for

Vulnerable		Discretionary (Gross household income not exceeding £28,000)	
------------	--	--	--

Section 7: Parent/Guardian/Carer(s)/Young Person Declaration

I confirm that the information given on this application form is true and correct and that I have provided supporting evidence of the Income Support/total household income shown above.

Adult 1 Signature		Date	D	D	M	M	Y	Y
Adult 2 Signature		Date	D	D	M	M	Y	Y
Young Person Signature		Date	D	D	M	M	Y	Y

Section 8: FOR SCHOOL OFFICE USE ONLY

Date Application Checked	D	D	M	M	Y	Y	Checked by		
Application Complete?	Y	N	Evidence Submitted?	Y	N	Approved	Y	N	

Section 9: Use of bursary funds

Bus Route if applicable

Briefly explain what the bursary will be used for.