

Bursary Fund Application Form 2019/20

This completed Application Form and evidence must be handed in within 4 weeks of your start date. If the Application Form and evidence is presented later than that date, payments can only be backdated up to 4 weeks.

Please complete the form and bring it together with your supporting evidence during your first week. You will be invited to a meeting to assess your evidence and needs within 4 weeks of submitting this form.

Learner Details							
Title:		First name:		Surname:			
DOB:		Age: <i>(You must be 16, 17,18 (and under 19) on 31st August 2020 to apply)</i>					
Address:							
Postcode:		Telephone:		Email:			
Have you the right of abode and been resident in the UK for the last 3 years?					Yes	No	

Bursary Criteria
To qualify you must be aged 16 or over and under 19 on 31 August 2020 and meet the ESFA's residency criteria. The bursary is paid to enable you to attend Health Futures and will only be paid if your attendance and behaviour meet the required standard.

Vulnerable Bursary Criteria		
To qualify you must fall into one of the below categories and produce the required evidence as stated.		
Are you in receipt of Income Support or Universal Credit? (evidence required - Income Support or Universal Credit Statement Letter)	Yes	No
Care Leaver or currently looked after in care? (evidence required - letter from Local Authority)	Yes	No
Disabled student in receipt of both Employment Support Allowance or Universal Credit and Disability Living Allowance/Personal Independence Payments (evidence required, award letter showing in receipt of both ESA (UC) + DLA/PIP)	Yes	No

Discretionary Bursary Criteria					
Your household income is one of the criteria, which will help us to assess your application. If your TOTAL Household income exceeds £25,000 per annum, you will not be eligible for a Bursary payment.					
Please tick to indicate what type of evidence you have provided. If you cannot provide evidence then we cannot process your application for bursary payments.					
P60		Income Support/Universal Credit (award letter)		Full TCAN Notice	
Self-employed earnings (official tax return)		Other benefits/pension (award letter)		Wage slips for household	

Please list the names of the household members and relationship to learner:	
Name	Relationship to Learner

Discretionary Bursary criteria continued

The amount of financial assistance you will receive is dependent on your personal circumstances. It is intended to help you with the costs of overcoming any financial barriers you may have when attending learning

Using the table below, please tell us what you will need financial assistance for and how much you believe you will need for each **day** in learning.

This information is strictly confidential and will only be used for this assessment purpose.

	How much will you need?
Travel	
Lunch	
Appropriate clothing to suit dress requirements	
Equipment	
Any other	

Free Meals (not applicable for Academies)

Free meals are targeted at disadvantaged Learners. For the purposes of eligibility for free meals, 'disadvantage' is defined by the Learners being in receipt of, or having parents who are in receipt of, one or more of the following benefits?

- Income support
- income based Jobseekers Allowance (ESA)
- support under part V1 of the Immigration and Asylum Act 1999
- the guarantee element of State Pension Credit
- Child Tax Credit (provided they are not entitled to Working Tax Credit) and have an annual gross income of no more than £16,190, as assessed by Her Majesty's Revenue and Customs.
- Working Tax Credit run-on – paid for 4 wks. after you stop qualifying for Working Tax Credit.
- During the initial roll out of the benefit, Universal Credit

Are you claiming for a free meal? Yes No

Learners who claim the 'Free Meal' element may still be eligible to claim the Discretionary Bursary.

Please provide your bank details below, as printed on your bankcard or statement.

Bursary payments will be paid directly into Learners bank accounts only (by BACS).

Please be aware that Providers can choose to pay Bursary awards 'in kind' e.g. by purchasing any equipment required or providing learners with a travel pass.

Account Name: _____	
Account Number: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Sort Code: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

LEARNER DECLARATION

- I declare that the information on this form is true and accurate to the best of my knowledge. I have made this claim for bursary payment, fully aware that any false statements can lead to withdrawal/refusal of any financial support and may lead me open to prosecution.
- I understand that if I refuse to provide information, which may be relevant to my claim, the Application will not be accepted.
- I understand that monies I receive under the bursary scheme will be paid on condition of standards of attendance and behaviour, as explained in the bursary fund – information for learners.
- **HOLIDAYS WILL BE UNPAID.**
- I will attend regularly and complete the course for which my bursary is supporting me.
- When changes to my household financial circumstances occur (which may result in changes to my claim), I confirm will notify Health Futures immediately.
- I will notify Health Futures immediately with any changes to my Bank/Building Society details.
- I understand that monies I receive under the bursary scheme have been awarded to provide me with financial support to allow me to continue in learning, and if I leave learning, financial support will stop.
- I understand that I do not have an automatic entitlement to bursary payments, and all payments are based on the information I have provided.
- I am clear that the bursary payments I receive are to provide me with means to remain in learning and are to be used for items such as: books, equipment, travel costs, meals, additional costs i.e. trips, miscellaneous course costs.
- I understand I have the right to appeal if I disagree with the outcome of my bursary application.
- This appeal should be made to Health Futures, but if I feel I have not been treated fairly, I can follow the Complaints Procedure as available on the website.

I confirm I have read 'Bursary Fund - Information for Learners' which was given to me with this application.

Applicant Signature: _____ **Date:** _____

Assessment and Approval 2019/20

FOR OFFICE USE ONLY

Eligibility – please tick appropriate box (✓)

Vulnerable Bursary		<p>Those young people who receive income support/universal credit</p> <p>Care Leavers or young people who are looked after children</p> <p>Disabled young people in receipt of both Employment Support Allowance and Disability Living Allowance/PIP</p>
Discretionary Bursary		<p>Young people facing financial barriers to participation in further education. Agreed standards of behaviour and attendance should be met.</p>
Free Meals		<p>Young people who qualify under the Guidance Rules and whose household is in receipt of one of the benefits criteria listed.</p>

Assistance Requested	Assistance Granted ✓
Travel	
Lunch	
Free Meals – in accordance with meeting criteria listed on page 3 Date recorded on ILR :	
Appropriate Clothing to suit training and placement requirements	
Equipment	
Any other	
NOTE - Must fall within guide amounts	

SIGNED: _____

DATE: _____

NAME: _____

POSITION: _____