# Trinity School 16-19 Bursary Fund Application Form 2025-26

**Applications should be submitted at the start of the autumn term and by Friday 12 September 2025 however emergency applications may be submitted at any point during the 2025-26 academic year.**

**Please read the 16-19 Bursary Fund Policy before completing this form and provide all the information requested. All applications are dealt with confidentially.**

|  |  |  |  |
| --- | --- | --- | --- |
| **Student’s full name** |   | **Form**  |  |
| **Full postal address of main residence Mon-Fri** |  |

**Priority Group**

This application for assistance from the 16-19 Bursary Fund is made under the priority group of (please tick one box):

|  |  |
| --- | --- |
| **Vulnerable student bursary**  |  |
| Students, please circle YES/NO. I am:* in care **YES/NO**
* a care leaver **YES/NO**
* receiving Universal Credit in my own right because I am financially supporting myself *or* financially supporting myself and someone who is dependent on me and living with me such as a child or partner **YES/NO**

**Please note that students who meet the criteria for bursaries for vulnerable groups are not automatically entitled to a bursary if they do not have financial needs and/or their financial needs are covered from other sources. There is a possibility of no award or a limited award.** |
| **Discretionary bursary** |  |
| Students, please circle YES/NO. I am:* living in a household with an annual household income of below £30,000 **YES/NO**
* in receipt of Free School Meals **YES/NO**
 |

**Individual assessment of student’s actual financial need**

Please detail below the **regular weekly expenses** you expect to incur in order to attend Sixth Form:

|  |  |  |
| --- | --- | --- |
| **Expense** | **Description**  | **Weekly cost** |
| Travel e.g., Megarider bus pass, rail ticket (evidence may be required) |  |  |
| Meals e.g., Bringing packed lunch, buying food in Sixth Form Bistro, buying food out of school, (evidence may be required) |  |  |
| Other, please specify (evidence may be required) |  |  |

# Household income

If you live with your parents/carers we need **full details of their household income.** This must includeevidence of all types and amounts of income received **for a full three months before the date of the application.** An assessment can only be made once all this information has been supplied.

**Please ensure that any letters of proof/award notices provided are complete, original documents and that no pages are missing. Original documents will be scanned and returned to students.**

|  |  |  |  |
| --- | --- | --- | --- |
| **Type of household income** | **Y/N** | **Amount per month** | **Suitable Evidence** |
| Wage – Parents/Carers’ **‘take-home’ pay figure after deductions** |  |  | Weekly/monthly pay slips or entry on bank statement. Self-employment accounts. |
| Universal Credit |  |  | Award notice or entry on bank statement |
| Disability Living Allowance/PIP |  |  | Letter of proof or entry on bank statement |
| Working Tax Credits/Child Tax Credits |  |  | Award Notice or entry on bank statement |
| Adult learner grant or bursary  |  |  | Award Notice or entry on bank statement |
| Job Seekers Allowance (JSA)Employment & Support Allowance (ESA) |  |  | Letter of proof or entry on bank statement |
| Maintenance/Child Support |  |  | Letter of proof or entry on bank statement |
| Other – please state e.g., investment income, rental income |  |  | Entry on bank statement |
| **Total monthly income:****(This must be completed)** |  |  |

**Student’s Bank/Building Society Account Details**

|  |  |
| --- | --- |
| Full name of account holder (as shown on statement) |  |
| Name and address of bank/building society |  |
| Sort code |  |  |  |  |  |  |
| Account number |  |  |  |  |  |  |  |  |

**Declaration**

I declare that the statements made on this form are true and, to the best of my knowledge and belief, are correct in every respect. I undertake to supply any additional information that may be required to verify the particulars given. I understand that if I refuse to provide information relevant to my claim, the application will not be accepted. I also undertake to inform the school in writing of any alteration to any of the particulars.

I agree to repay the school in full and immediately any sums advanced to me if the information I have given is shown to be false or deliberately misleading. Giving false or incomplete information that leads to incorrect/overpayment may result in future payments being stopped and any incorrectly paid funds being recovered. This might result in a referral to the police with the possibility of the student and/or their family facing prosecution.

I am aware that the funding covers only this school year, that I must reapply next year and that there is no guarantee that I will receive funding next year even if I am eligible for the current year.

I have read and understood the requirements of the 16-19 Bursary Fund Attendance and Conduct Policy and agree to abide by the conditions of the policy if I am eligible for funding.

**Signed (student):** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Signed (parent/carer):** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please return to Mrs Little (Sixth Form Office) at the start of the autumn term and by Friday 12 September 2025.** **All applications** **are dealt with confidentially. Emergency applications may be submitted at any point.**