Westcountry Schools Trust IVYBRIDGE COMMUNITY COLLEGE



16 – 19 Bursary Application Form 2024-25

INTRODUCTION

- PRIOR TO COMPLETING THIS FORM PLEASE READ THE GUIDANCE NOTES
- BURSARY COMMITTEE WILL NEED TO HAVE EVIDENCE OF ENTITLEMENT BEFORE APPROVING APPLICATION
- PLEASE COMPLETE THIS FORM IN CAPITALS AND IN BLACK OR BLUE INK
- PLEASE ENSURE THE APPLICATION IS COMPLETE WITH ALL RELEVANT, ORIGINAL SUPPORTING EVICENCE BEFORE SUBMITTING IT

Student Details

| Title: | Forenam | me(s): | | Surname: | | | | | | | | |
|--|-----------|------------|-----------|----------|---|---|---|---|---|---|---|---|
| Preferred Forenar | ne(s): | | | | | | | | | | | |
| Tutor Group | | | Date of B | irth: | D | D | M | M | Υ | Υ | Υ | Υ |
| Home address and postcode: | | | | | | | | | | | | |
| Mobile Number: | | | | | | | | | | | | |
| Email address: | | | | | | | | | | | | |
| Have you been resident in the UK for more than 3 years? Yes / No | | | | | | | | | | | | |
| Courses being t | aken in S | Sixth Forn | า | | | | | | | | | |
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Category of bursary being claimed

Please refer to the Guidance Notes and tick as appropriate. All supporting evidence must be submitted in original format, with this application.

(Please tick as appropriate)

| V1 | Young person in Care/Care Leaver/Student receiving financial support in own name as per guidance |
|----|--|
| D1 | In receipt of FSM and/or household income up to £25,300 |
| D2 | Household income between £25,301 – £29,500 |
| D3 | Exceptional one off need (evidence of household income required) |

Supporting Evidence

V1 – see guidance notes for further details of evidence required to support claim

| Are currently in care (as defined by social services) | |
|---|--|
| Are leaving or have recently left care | |
| Are in receipt of Income Support or Universal Credit in their own name | |
| Are disabled and in receipt of Disability Living Allowance or Personal Independent Payment in your own name and Employment Support Allowance or UC in own name | |

D1, D2 and D3 - see guidance notes for further details of evidence required to support claim

| Evidence | Tick those which apply | Details of evidence required (originals please) |
|---|---------------------------|--|
| Income Support | | An award letter which is less than three months old on the date of application |
| Working Tax Credit | | Pages 1-6 of the current year Tax Credit Award (i.e. 6 April 2023 – 5 April 2024) |
| Income-based Employment and Support Allowance (ESA) | | An award letter which is less than three months old on the date of application |
| Universal Credit | | The last three months awards statements |
| Other Benefits/Pension (specify) | | An award letter which is less than three months old on the date of application |
| Earned household income with no additional benefits (D3 only) | | Include last three months of household wage slips |

D3 – additional information needed

Exceptional Circumstances

Please enclose a supporting letter detailing:

- (i) Where your financial circumstances are providing barriers to completing your course.
- (ii) How a bursary award will support your continued studies /education. You should include details of how additional funding will allow you to meet the costs of items such as: Essential books and equipment Transport / Meals / Additional course costs, e.g. trips / Accommodation / Other items
- (iii) Please provide an estimate of the costs of the items you need. You may be asked to provide evidence of expenditure

Use of Bursary Funds

Please indicate in the table below how the Post 16 Bursary award will support your continued studies/education – see guidance section below for further details.

| | | | | PAYMENT TYPE | | | | |
|---|----------------------------------|-----------------|--|--|------------------------|------------------|--|--|
| Type of support | | Further details | PLEASE TICK PREFERENCE | | | | | |
| | Value to be claimed (£) | | Pay to student via monthly allowan ce | Student to buy and claim back on producti on of receipt | Order via School | Pay't in Kind | | |
| Transport to/from College | | | | | | | | |
| Study Books | | | | | | | | |
| Course Fees | | | | | | | | |
| Curriculum Trips | | | | | | | | |
| Food Allowance | | | | | | | | |
| Equipment | | | | | | | | |
| IT equipment | | | | | | | | |
| Uniform/clothing for vocational courses | | | | | | | | |
| UCAS registration | | | | | | | | |
| University Open Days/interview costs | | | | | | | | |
| Other (please specify) | | | | | | | | |
| TOTAL | | | |] | | | | |

Guidance

Type of support

Please indicate in the 'Value to be claimed' column whether you wish to claim for costs, by following the guidelines below:

- Transport please provide an expected value of what this will cost. Depending on the individual school/travel arrangements, this will either be paid to the relevant organisation directly or to the student to then make onward payment.
- Study Books please provide an expected value of what these will cost.
- o **Course Fees** please provide an expected value of what these will cost. These costs will be paid on your behalf (payment in kind).
- o **Curriculum Trips** please provide an expected value of what these will cost. These costs will be paid on your behalf (payment in kind).
- o **Food allowance** the value of this will depend on your school. Please indicate if you wish to claim for this and the school will calculate the amount to be allocated. This will then be added directly to your catering account by the school (payment in kind).
- Equipment please provide an expected value of what this will cost and provide further detail as to what equipment will be purchased.
- o **IT equipment** please provide an expected value of what this will cost and provide further detail as to what IT will be purchased.
- Uniform/clothing for vocational course please provide an expected value of what this will cost and provide further detail as to what clothing will be purchased.
- UCAS registration please provide expected value of what this will cost (payment in kind).
- o **University open days / interview costs** please provide an expected value of what this will cost and provide further detail as to what this will include.
- Other please provide an expected value of what this will cost and provide further detail as to what this will include.

Please note – you are expected to keep and provide receipts for all items purchased directly by you. These receipts should match the value of bursary funding awarded. Copy of receipts should be submitted to your Sixth Form Team at the end of each term, in an envelope with your name and Tutor Group clearly marked on it. A reconciliation of funding paid and costs incurred will take place at the end of each term. If receipts are not provided it may result in future payments being stopped and/or funds being recovered.

The maximum claim for a single item is capped at £500.

A claim for any single item above £500 would require a written request, to the Sixth Form Team for their consideration.

Payment type options:

Pay to student via monthly allowance

Anything requested and approved in this category will be totalled up and paid to you in nine monthly instalments (October – June).

You are expected to keep and provide receipts for all items purchased directly by you. These receipts should match the value of bursary funding awarded. Copies of receipts should be submitted to your Sixth Form Team at the end of each term, in an envelope with your name and Tutor Group clearly marked on it.

A reconciliation of funding paid and costs incurred will take place at the end of each term. If receipts are not provided it may result in future payments being stopped and/or funds being recovered.

Student to buy and claim back on production of receipt

If you chose to purchase an approved item from your own funds, we can then reimburse this cost to you, provided the receipt is provided and the items have been pre-approved.

Order via school

If you would like the Sixth Form Team to purchase a specific item on your behalf, please provide the exact details of the item and where it can be purchased from and this can be paid for directly from the bursary fund.

Payment in kind

This will include all items that can be paid for on your behalf e.g. course fees, food allowance, curriculum trips and transport (depending on the individual school arrangements).

Purchase of IT and equipment

Please be aware that a condition of the bursary fund is that IT and other equipment with a value over £200 must be returned to the College when you have completed your study programme.

Please complete and return this form to the Sixth Form Team by Friday, 27 September 2024 with the relevant evidence attached

I agree that the evidence provided in support of this application is correct and complete to the best of my knowledge and belief.

I confirm that I have read and understood the guidance and criteria for the Post 16 Bursary fund and I am not in receipt of a Post 16 Bursary from another provider.

I confirm that I will only spend my bursary allowance on items detailed on my approved application form.

If my circumstances change, I will inform Ivybridge Community College immediately and understand that this may affect future payments.

| Signed (Student): | | | | | | | |
|--|----------------------------------|-------|--|--|--|--|--|
| Print Name (Student): | Date: | | | | | | |
| | | | | | | | |
| Signed (Parent/Carer): | | | | | | | |
| Print Name (Parent/Carer): | | Date: | | | | | |
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| | | | | | | | |
| For Office Use only: - | | | | | | | |
| Application received (date): | | | | | | | |
| Supporting evidence supplied: | | | | | | | |
| Supporting evidence returned: Yes / No | | | | | | | |
| Category claimed: V1 / D1 / D2 / D3 | | | | | | | |
| FSM: Yes / No | | | | | | | |
| Transport being claimed for: Yes / No | | | | | | | |
| Application approved: Yes / No | Date: | | | | | | |
| Amount awarded: £ | | | | | | | |
| Bank details provided: Yes / No | | | | | | | |
| Contract and Agreement signed and retu | rned: Yes/No | | | | | | |
| Additional Comments/Information: | Additional Comments/Information: | | | | | | |
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