

# Caistor Grammar School

A Selective Academy Church Street Caistor Lincolnshire LN7 6QJ Tel. 01472 851250

enquiries@caistorgrammar.com Headteacher: Mrs Shona Buck B.Ed.

## Sixth Form 16-19 GENERAL Bursary Fund Application Form 2025 to 2026

Please complete this form and email (with your supporting evidence) to Claire Mosey, Finance Manager, (<u>claire.mosey@caistorgrammar.com</u>), or hand in at the Finance Office, in the OT Building (first floor).

#### 1.1 Student Details

Surname / Family name	
First name(s)	
Date of Birth:	
Age on 31st August 2025	
Registration Form:	
	You must be aged 16, 17, or 18 on 31 August 2025 to apply.
Have you the right of	
abode and been resident in	Yes/no
the UK for the last 3	
years?	
1.2 <u>Address Details</u>	
Home Address	
Including Postcode	
N( 1 '1 ( 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Mobile telephone number	
E-mail address	
1.3 Course Details	
1.5 Course Details	
Courses being studied	

#### 2.1 Vulnerable Bursary Eligibility Criteria

To qualify you must fall into one of the below categories and produce the required evidence as stated. You must complete the financial information section for your application to be assessed, and provide the necessary evidence.

Are you in receipt of Income Support or Universal Credit in your own right? (evidence	Yes
required - Income Support or Universal Credit Statement Letter)	
Care Leaver or currently looked after in care or unaccompanied asylum seeker?	Yes
(evidence required - letter from Local Authority)	
Disabled student in receipt of both Employment Support Allowance/Universal Credit	Vac
equivalent and Disability Living Allowance/Personal Independence Payments (evidence	Yes
required, financial statement showing <b>both</b> ES + DLA/PIP)	

## 2.2 Discretionary Bursary Request

Your household income is **one** of the criteria which will help us to assess your application. Priority will be given where **TOTAL** Household income does not exceed £31,000 per annum, but we will consider individual family circumstances which may affect household income (which should be detailed in the additional information box below). You must complete the financial information section for your application to be assessed and provide the necessary evidence.

Please provide any	
1	
additional relevant	
information, eg wider	
family circumstances, or	
additional responsibilities	
that may mean that you	
need extra financial help,	
which you wish to be	
taken into consideration	
when we assess your	
application.	

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 (you can submit further requests during the year if the need arises).

Expense	Details	Amount requested
Books and		£

Transport costs to and from School						
(specify which bus					£	
company etc)						
<b>Emergency meals</b>					£	
Course trips					£	
Interviews and Open Days at					£	
Universities Other costs					£	
(Please specify)					ı.	
TOTAL AMOUNT R	REQUESTE	ED			£	
3.1 Financial Inform	<u>ation</u>					
Are you and / or your si						
receipt of free school me Sibling Name(s)	eals?		Yes /	No		
Storing (variety)						
3.2 (Adult) Househ	old Membe	ers				I
		Per	rson 1		Person 2	
Surname						
First name(s)						
Relationship to Student						
Telephone						
3.3 <u>Financial Asses</u>	sment – Inc	<u>come</u>				
Please specify your tot per annum	al househol	ld income	£			
per annum			ow .			
To be	completed i	by the person(s	) responsible for th	e househo	ld bills	

Equipment

Person 1

Person 2

If you are not employed please tick the relevant boxes to indicate the benefit(s) you receive.

If yes, please submit P60 for details

If yes, please submit P60 for details

Are you employed? (Yes / No)

Are you employed? (Yes / No)

Benefit	Universa	Job Seekers	Employment	Incapacity	Carer's	Housing	Council Tax
received	1 Credit	Allowance	Support	Benefit	Allowance	Benefit	Benefit
			Allowance				
Person 1							
Person 2							

#### 3.4 <u>Financial Assessment – Other Income</u>

Please tick the relevant boxes to indicate all other income received into the household

Other	Universa	Working	Child	Child	Grants,	Any other income / benefit –
Income	1	Tax	Tax	Benefit	Bursaries,	please specify e.g. maintenance,
	Credit	Credit	Credit		etc	PIP
Person 1						
Person 2						
Applicant						

## 4.1 Evidence

Whatever you have declared in 2.3 and 2.4 above must be backed up by current evidence (photocopies accepted) in order for an assessment to be made.

The tables below show the evidence you will need to provide with your application form.

Once you have declared and identified your benefits on the application, find the 'Type of Income' that applies to you in the first column and the 'Evidence Required' column will tell you what you need to provide.

Type of Income	Evidence Required
Annual Salary	P60 for tax year 2024-25, or week 52 (last week in March 2025) payslip or
	month 12 (March 2025) payslip
Universal Credit	Entitlement / Award letter – dated within the last 3 months
Income Support	Entitlement / Award letter – dated within the last 3 months
Job Seekers Allowance	Entitlement / Award letter – dated within the last 3 months
Disability Living Allowance	Entitlement / Award letter – dated within the last 3 months
Employment Support Allowance	Entitlement / Award letter – dated within the last 3 months
Incapacity Benefit	Entitlement / Award letter – dated within the last 3 months
Carer's Allowance	Entitlement / Award letter – dated within the last 3 months

<b>Housing Benefit</b>	Entitlement / Award letter – dated within the last 3 months
Any other benefit	Entitlement / Award letter – dated within the last 3 months
Working Tax Credit	Working Tax Credit Award Notice marked "2024-25". Must be for full year and not partial awards (FULL AWARD NOTICE)
Child Tax Credit	Working Tax Credit Award Notice marked "2024-25". Must be for full year and not partial awards (FULL AWARD NOTICE)
Child Benefit	Award letter
Grants or bursaries etc	Relevant paperwork detailing entitlement and amount paid
Any other income	Relevant paperwork

#### 5.1 Bank Details

Reimbursements for purchases not in kind are paid directly into the **student's bank account**. Please provide bank details below, as printed on your bank card or statement.

Account Holders Name:	
Bank Name and Branch:	
Account Number:	Dolt Coac.

#### 6.1 <u>Declaration</u>

- I declare that the information on this form is true and accurate to the best of my knowledge
- I have read and understand the 16-19 Bursary Fund Policy Statement provided with this application.
- 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, behaviour and progress as explained in the guidance notes.
- I will attend regularly and complete the course for which the bursary has been provided.
- When changes to my household financial circumstances occur (which may result in changes to my claim), I confirm will notify the school immediately.
- 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 education, and if I leave education all 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 education and are to be used for items such as: books, equipment, travel costs, meals, additional costs i.e. trips, miscellaneous course costs.
- Any equipment provided will remain the property of the school and should be returned in good condition at the end of the course.
- I understand I have the right to appeal if I disagree with the outcome of my Bursary Application. This appeal should be made to the Head of Sixth Form.

Signed (Student)	 Date	
Signed (Person 1 or 2)	 Date	
For School use		
Authorised By:	 Position:	
Date:		