



CHIPPING NORTON SCHOOL
16-19 BURSARY FUND APPLICATION FORM
2020-2021

Please read the accompanying Guidance Notes when completing the application form

SECTION 1: PERSONAL DETAILS

Full Name:	
Date of Birth:	Gender
Your current address:	Your parent(s)/carer(s) name(s) and address(es)
Telephone number(s):	Email address:

SECTION 2: ENTITLEMENT BURSARY:

Are you (the student):
In Care <input type="checkbox"/> A Care Leaver <input type="checkbox"/> In receipt of Income Support <input type="checkbox"/>
In receipt of Employment Support Allowance and Disability Living Allowance <input type="checkbox"/>

SECTION 3: DISCRETIONARY BURSARY

Is your household in receipt of one or more of the following benefits (please tick all that apply):	
Income Support	<input type="checkbox"/>
Income Based Job Seekers Allowance	<input type="checkbox"/>
Income-related Employment and Support Allowance	<input type="checkbox"/>
Pension Credit Guarantee Credit	<input type="checkbox"/>
Universal Credit	<input type="checkbox"/>
OR	
If your household is not in receipt of one of the benefits listed above, but parent(s)/carer(s) are employed or self-employed with a gross household income of less than £25,000. If you live with two parents or carers we take the income of each person into account.	
Yes <input type="checkbox"/>	No <input type="checkbox"/>

SECTION 4: FUNDING REQUIREMENTS:

Do you need help with travel costs?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
If yes, how do you intend to travel to school?	Bus	<input type="checkbox"/>	Car/Motorbike	<input type="checkbox"/>
Please estimate how much your travel will be per week?	£.....			

Do you need help with any other costs? <i>Please tick all that apply</i>					
Books	<input type="checkbox"/>	Amount: _____	Equipment	<input type="checkbox"/>	Amount: _____
Exam Re-sits	<input type="checkbox"/>	Amount: _____	Trips/residential	<input type="checkbox"/>	Amount: _____
Other	<input type="checkbox"/>	Amount: _____	Art/Design project materials	<input type="checkbox"/>	Amount: _____

SECTION 5: ADDITIONAL INFORMATION

Please provide any further information you think may support your application:
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SECTION 7: STUDENT & PARENT/CARER DECLARATION

This declaration must be signed by the student and parent/carer.	
I/We certify that the information given is correct, to the best of my/our knowledge	
I/we understand that payments are dependent upon the fulfilment of contract terms re minimum attendance and meeting of deadlines	
Student Signature.....	Date.....
Parent/Carer's Signature.....	Date