

The 16-19 Bursary Fund is only open to students not in receipt of EMA.

Payments will be based on current income and circumstances.

Applications must be supported by evidence.

Payments will be made subject to evidence of effort, attendance and work performance.

Additional payments may be made in year for exceptional work performance (subject to available funds) and emerging hardship.

Closing date for applications is 14 October 2011.

Applications will only be successful if total household assessed income is £20,000 or below.

PERSONAL DETAILS

1. Full name of student: _____
 ID No: _____ Tutor Group : _____
 Address: _____

 Post Code: _____ Telephone No: _____
 Date of birth: _____ Age at 31/8/11 _____
 Are you in receipt of EMA: YES / NO (if YES state amount per week): _____

DEPENDENT/INDEPENDENT

2. You may be considered independent if any of the following applies to you, if applicable, please **tick** the relevant statement(s);
- If you are estranged from your parent(s)/guardians,
 Living under the care of Health and Social Services or with foster parents,
 Receiving Income Support/Income Based Employment and Support Allowance in your own name or
 Have a child of your own that you are responsible for.

3. Please give any details of specific costs you may need help with.

Expense	Details
Essential books & equipment	
Meals	
Transport to & from college	
Course trips	
Interviews / Open Days	
Other	

STUDENT BANK ACCOUNT DETAILS

4. You must provide us with details of an account for the Financial Support payments to be made.

Name of account holder: _____

Account number:

Sort code: - -

Building society roll number (if applicable): _____

UNDERTAKING BY STUDENT

5. • I declare that the information stated is to the best of my knowledge and belief correct in every respect.
 • I authorise the college to verify the information stated.
 • I agree to notify the college immediately of any change in my financial circumstances and to supply any additional information which may be required to verify the facts stated.
 • I understand that if this application is successful, payments will be subject to **satisfactory attendance and work performance.**

Sign: _____ Date: _____

If you are a **dependent student**, please now pass this application onto your parent(s)/guardian(s) to complete.

If you are an **independent student**, you and your partner (if applicable) should now complete the rest of the form from section 7.

6. Your surname: _____

Your first name: _____ Relation to Student: _____

Please indicate whether Married/Separated/Divorced/Widowed/Single/Living as Man and Wife

7. Your husband, wife or partner's name if he or she lives with you

Surname: _____ First name: _____

If no such person lives with you, please write 'None' here: _____

8. **OTHER CHILDREN (Aged under 18)**

Set out below the names of each dependent child who is :-

- (a) **living at home and is under school leaving age** or
 (b) **in full attendance at school or other educational establishment** or
 (c) **living at home and has left school but has no wages or state benefits**

Names in full	Date of birth	College / School attending

TO CALCULATE YOUR DEPENDENT CHILD DEDUCTION:

For each dependent child named above, an allowance of £800 will be given.

Please enter the total amount of your allowance in the box provided.

e.g. for 2 children the allowance will be £800 x 2 = £1600.

		Partner 1 £ p	Partner 2 £ p
9.	Enter amount of income per week or enter 'O' if NONE		
A	FULL OR PART-TIME WAGES If yes, give name/address/tel. no. of your employers		
	Work Address Partner 1 _____ _____		
	Work Address Partner 2 _____ _____		
	In the columns opposite give the average amount you get every week before anything is taken off :		
B	WORKING TAX CREDIT		
C	CHILD TAX CREDIT		
D	INCOME SUPPORT		
E	JOB SEEKERS ALLOWANCE		
F	INCAPACITY BENEFIT / EMPLOYMENT AND SUPPORT ALLOWANCE Higher [] If yes, say when you expect to go back to work Lower [] _____ No []		
G	PENSIONS If yes, please tick box below Retirement [] Widow's [] Disability [] Army [] Other []		
H	MAINTENANCE (From former marriage)		
I	RENT FROM LODGERS AND LETTING ROOMS If yes, do NOT include money from your own family		
J	BANK OR BUILDING SOCIETY INVESTMENT INTEREST		
K	ANY OTHER INCOME eg Carers Allowance (including value of Benefits or Allowances, ie coal, meals, etc.) If yes, please give details		
L	TOTAL INCOME	(1)	(2)
M	ADD TOGETHER INCOME TOTAL (1) AND (2) =		
N	ENTER TOTAL x 52 (this gives your annual income)		
O	ENTER AMOUNT OF DEPENDENT CHILD DEDUCTION (From section 8)		
P	DEDUCT (O) FROM TOTAL (N) this gives your total assessed income		

The total assessed income (P) must be £20,000 or below to qualify for financial support.

Please do not submit this form if (P) is above £20,000.

10. UNDERTAKING BY PARENT / GUARDIAN

- I declare that the information stated is to the best of my knowledge and belief correct in every respect.
- I authorise the college to verify the information stated.
- I agree to notify the college immediately of any change in my financial circumstances and to supply any additional information which may be required to verify the facts stated.
- I understand that if this application is successful, payments will be subject to **satisfactory attendance and work performance**.

Sign: _____ Date: _____

Please note:

It is important that you submit proof of income with this application form failure to do so will result in the delay of the decision on your application.

11. APPLICATION CHECKLIST

Please make sure that you have ticked all items on the checklist before you return your application for assessment. Failure to do so will result in your application being returned to you without assessment.

Have you:

- Completed all sections
- Included evidence for all income (For wages we require a recent payslip. For all other income we require official letters stating payment amounts or recent bank statements showing regular credits)
- Student bank account details
- Signed and dated student undertaking
- Parent/guardian (if applicable) signed and dated

Returning your application

Applications can be handed in to the college Student Reception or sent by post.

If you send your application by post please check that you have paid the correct postage for the weight/size of the envelope.

Applications can be posted to:

Student Reception, NEW College, Park Lane, Pontefract, WF8 4QR

If you have any queries regarding this application please email them to:

studentfinance@ncpontefract.ac.uk

The information provided on this form is confidential and will only be seen by authorised College staff.

It is required and will only be used to process your 16-19 Bursary Fund Application and for the prevention of fraud. Information may be provided to College Management and Government Bodies but no individual can be identified from this.

FINANCE USE:

Assessed by: _____ Authorised by: _____ Bank details updated