

## Poole High Sixth Form 2025-2026 16-19 Bursary Fund Application Form



**Dear Student** 

Please read this application form together with our 16-19 Bursary Fund Policy which is published on our school website. If you have any queries please come to the Sixth Form office or make contact on 01202 662001 or email sixthform@poolehigh.poole.sch.uk.

To be considered for the Bursary, please complete this form and send it to: **Bursary Scheme, Poole High School Sixth Form, Wimborne Road, Poole, BH15 2BW**. Alternatively, it can be handed into the Sixth Form office.

	SECTION A – S	TUDENT DETA	ILS		
Last Name		First Name			
D.O.B.		Age at 31 <sup>st</sup> August 2025		years	months
Address		Residential		British Citizen EU/EEA Citizen	
		Status (please tick		Asylum Seeker Refugee	
		one)		Other	
Telephone		Email			

## **SECTION B - LEARNER STATUS**

Tick all of the boxes below that apply to you (the student):

- I live in Local Authority Care
- □ I live on my own after leaving Care
- I receive income support or universal credit (in my own right)
- □ I receive disability living allowance (DLA) or personal independence payments (PIP) in my own right as well as Employment & Support allowance or universal credit in my own right

If you have ticked any of the above, you will need to provide the following evidence documents:

- for students who are in care or a care leaver, written confirmation of their current or previous looked-after status from the relevant local authority this is the local authority that looks after them or provides their leaving care services. The evidence could be a letter or an email but must be clearly from the local authority
- for students in receipt of Income Support or Universal Credit, a copy of their Income Support or Universal Credit award notice. This must clearly state that the claim is in the student's name/confirm they are entitled to the benefits in their own right. The evidence must not state any conditions that prevent them from participating in further education or training. For students in receipt of Universal Credit, we must also see a tenancy agreement in the student's name, a child benefit receipt, children's birth certificates, utility bills etc
- for students receiving UC/ESA and Disability Living Allowance and Personal Independence Payments, a copy of
  their UC claim from DWP (UC claimants should be able to print off details of their award from their online
  account). Evidence of receipt of Disability Living Allowance or Personal Independence Payment, must also be
  provided

	I live with parents/guardia	ans who have resno	nsibility for me		
	I live independently	ans who have respe	of the		
	I am responsible for caring	for a family meml	her		
	I live with a partner/spous		oci		
	I have dependent children				
	I am currently in receipt o	•	c		
Ш	ram currently in receipt o	THEE SCHOOLINEAR	3		
IF YO	OU HAVE TICKED THAT YOU L	IVE WITH PARENTS	S/GUARDIANS, PI	LEASE COMPLETE THE TABLE BELO	W
		Adult	1	Adult 2	
	Last Name				
	First Name				
Re	elationship to Student				
		SECTION C	- DETAILS OF IN	СОМЕ	
ls vo	ur total current household a	nnual income incl k	penefits (except [	DLA/PIP) less than £22,000?   YES	S □ NO
•					
Total	l current household annual ii	ncome (including b	enefits) being de	clared: £	
Num	ber of children (under 18 yea	ars of age) in the h	ousehold:		
Is Ad	lult 1 currently in paid emplo	yment/self-emplo	yed? □ YES □ NO		
Nam	e of employer(s)				
Is Ad	lult 2 currently in paid emplo	yment/self-emplo	yed? □ YES □ NO		
Nam	e of employer(s)				
Pleas	se provide evidence of curre	ent income from e	mployment, e.g.	payslips, bank statements or Uni	versal Credit
state	ement.				
Pleas	se give details of what state b	enefits (if any) the	household are cu	rrently in receipt of:	
1		Amc	ount(£)	Frequency (weekly/monthly)	
2		Amc	ount(£)	Frequency (weekly/monthly)	
3		Amo	ount(£)	Frequency (weekly/monthly)	
4		Amo	ount(£)	Frequency (weekly/monthly)	
5		Amo	ount(£)	Frequency (weekly/monthly)	
6		Amc	ount(£)	Frequency (weekly/monthly)	
Pleas	se attach original documents	s to your application	on as evidence of	current household income. Scho	ol will take a
сору	of these to be held securely	on school site unti	I retention perio	d is met, originals will be returned	l to you.
Docu	iments must be dated within	the last <b>3 months</b> t	o show proof of c	rurrent income. If your document p	re-dates this,
	se also provide the last <u><b>3 mon</b></u>				
Pleas	se tick the list below to show	which evidence you	u have included w	vith your application:	
	Income Support/Universa		Pension Guarai		
	Child Tax Credit			nd Support Allowance	
	Working Tax Credit			Part IV of the immigration and Asylo	um Act 1999
	Job Seekers Allowance		P60	-	
	Payslips		Bank Statemen	ts	

Please tick all that apply:

The Discretionary Bursary will be allocated to each eligible applicant as a share of the funds available. The applicant's attendance MUST remain above 95% in order to receive the full allocation.

All funding is **subject to levels of funding** that Poole High School receives from the Government. **No assumption should be made for entitlement to funding** and Poole High School reserves the right to stop and remove funding at any time. Any information provided that is found to be false or inaccurate could result in funding being withdrawn and Poole High School taking action to recover any payments already made

## **SECTION E – DECLARATION**

- I/we declare that the information in support of this application is complete and correct to the best of my/our knowledge
- I /we will inform the school immediately, if circumstances affecting this application change, which may affect my eligibility for support
- I/we understand that this information will not be shared with third party organisations, except for audit purposes
- I/we understand that non-attendance and non-compliance with the Sixth Form code of conduct may result in loss of financial support
- I/we have read and understood the policy document for the Bursary Scheme and agree to abide by its terms and conditions
- I have completed the 'Type of Assistance Needed' form and enclose evidence (e.g. bus ticket/bus pass receipt, etc)

Student signature	 Date
Adult 1 signature	 Date
Adult 2 signature	 Date

For students applying at the beginning of term, please return this form by Monday 30<sup>th</sup> September 2025. We appreciate that circumstances may change throughout the year and therefore we remain open to applications all year.

OFFICE USE ONLY Date received:			
Decision:			
Signature:			

Please indicate on this form, what costs you anticipate will need to be covered by your Bursary Fund, should your application be successful. **PLEASE COMPLETE ALL THAT APPLY.** You must provide evidence (e.g. a receipt) to show you have purchased a particular item (unless purchased by the school on your behalf) if it is a cost you have already incurred.

Please advise which type of assistance you think yo	u	Frequency
will require	Cost	of payment
<b>Lunch</b> (if not covered by the free school meal system)	£2.60	□ Daily
Transport support - costs associated with travel to and from school  Transport being used (e.g. bus)  Distance from home to school	£	□ Daily □ Other, please specify □ Not required
Specialist Clothing (e.g. P.E kit) Please supply details:	£	□ Once □ Other
Financial support needed towards books, materials and equipment needed for your courses, and exam fees.  Please give full details, continue on a separate page if necessary:	£	□ Daily □ Other
Educational visits related to your courses (including universit visits).  Please supply details	f	□ As required
Do you require a school laptop for use on school premises?	Yes/No	
Do you require a school laptop for use at home?	Yes/No	
Please list your courses being studied here and circle first year or second year:  Subject 1		

Please note that not all expenses may be covered due to amount of funds available. **Receipts must be kept and provided.**