

## Chelmsford County High School for Girls 16-19 Bursary Guidance and Application

Students aged between 16 and 19 who may be facing financial hardship whilst in full-time education can apply to receive bursary funding.

To be eligible to receive a bursary you must:

- Be aged 16 or over but under 19 on 31 August 2024
- Have the legal right to be a resident in the United Kingdom at the start of your study programme
- Have a household income of £40,000 or less or
- Be in care / a care leaver or
- Be in receipt of Income Support or Universal credit in your own name or
- Be in receipt of Disability Living Allowance or Personal Independence Payments, as well as Employment Support Allowance or Universal Credit in your own name

For further details, please visit <a href="https://www.gov.uk/1619-bursary-fund/what-youll-get">https://www.gov.uk/1619-bursary-fund/what-youll-get</a>

When completing the below application form, please fill in all sections and provide evidence as requested. The awards will be dependent on adherence to the Sixth Form Contract, excellent attendance (a minimum attendance of 90% will be expected, with all absence properly authorised), as well as excellent application and conduct.

All students are welcome to apply for a bursary. Please submit this application form to Mrs Shields in the Finance Office or email it to <a href="mailto:eshields@cchs.co.uk">eshields@cchs.co.uk</a> by Friday 20<sup>th</sup> September 2024. Please note that this is not a final deadline for applications for the year, and we encourage students to apply at any point during their time in the Sixth Form if financial support is needed.

All students are required to complete a statement of need (what you need the money for and how much) which is used to assess the funding limit that you will be awarded. It is recognised that expenses may occur during the year that you are not aware of at the time of application, these will be considered as they arise depending on funding availability.

Once applications have been assessed in line with the eligibility criteria, the Finance Team will contact you to let you know if your application has been successful and provide further information. All applications will be handled in the strictest confidence.

#### Student Details:

Surname:	
First Names:	
Date of Birth:	
Address:	
Post Code:	
Tel. Number:	



# **Chelmsford County High School for Girls** 16-19 Bursary Guidance and Application

Email Address:	
Form Group:	
Do you receive free	Yes / No
school meals?	
-	
Bank Details:	
	pank details. Bursary payments are made directly to the student's bank
account by bank transfe	
,	
Name of Bank:	
Name on Account:	
Sort Code:	
Account Number:	
Parent / Carer Detai	ls:
Jaioi Botai	<del></del>
Surname:	
First Names:	
Address:	
Post Code:	
Tel. Number:	
Email Address:	
Application / Eligibil	ity Details:
5	-
Please tick the type of B	ursary you wish to apply for:
. todoo dok dio typo of bi	areary year mon to apply for
Discretionary Bursary	
Districtionary bursary	
If your total household in	ncome is below £40,000, you may be entitled to support with costs such as
-	ent or activities (including school trips), food during the school day, travel to
	uniform (blazer) and costs of attending university interviews / open days. The
	n to review / approve applications where the total household income exceeds
the threshold by up to 59	········
Defined Vulnerable G	roups Bursary

If you are in one of the following groups, you will be entitled to a bursary of up to £1,200, provided that you can demonstrate need for the money:

• Students living in care or who are care leavers



# **Chelmsford County High School for Girls** 16-19 Bursary Guidance and Application

- Students receiving Income Support or Universal Credit because they are financially supporting themselves and someone who is dependent on them and living with them such as a child or partner
- Students receiving Disability Living Allowance or Personal Independence Payments in their own right, as well as Employment and Support Allowance or Universal Credit

## **Discretionary Bursary:**

We require financial evidence for your <u>household</u>. Please tick and enclose all that apply:

Evidence Required	Total Annual	Tick all that apply and
	Income	enclose evidence
Last 3 months payslips		
and bank statements		
Last 3 award statements		
Award notice / last 3		
months bank statements		
Award notice / last 3		
months bank statements		
Letter dated in the last 3		
months / last 3 months		
bank statements		
Last 3 months bank		
statements		
Letter / last 3 months		
bank statements		
Award notice /evidence		
of pension income		
Total Annual Household Income:		
of adults in the household:		
	Last 3 months payslips and bank statements  Last 3 award statements  Award notice / last 3 months bank statements  Award notice / last 3 months bank statements  Letter dated in the last 3 months / last 3 months bank statements  Last 3 months bank statements  Last 3 months bank statements  Letter / last 3 months bank statements  Letter / last 3 months bank statements  Award notice / evidence of pension income	Last 3 months payslips and bank statements  Last 3 award statements  Award notice / last 3 months bank statements  Award notice / last 3 months bank statements  Letter dated in the last 3 months / last 3 months bank statements  Last 3 months bank statements  Letter / last 3 months bank statements  Award notice / evidence of pension income

### **Defined Vulnerable Groups Bursary:**

Please enclose proof of your status in one of the following categories:

	Evidence Required	Tick all that apply and enclose evidence
You are living in care or have	A letter from the Local	
recently left care	Authority	



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You are receiving Income	A letter dated in the last 3	
Support or Universal Credit	months and last 3 months	
	bank statements	
You are receiving Employment	A letter dated in the last 3	
Tod die receiving Employment	A letter dated in the tast 3	
Support Allowance and	months and last 3 months	
• • •		

### **Statement of Need:**

Please briefly outline below what you require the funding for, giving estimated costs wherever possible:

Subjects Studying:	
Travel:	
Please give details of public transport journey and	
costs	
Essential books and equipment, including	
ICT:	
Please give details of books/equipment required	
for courses and estimated costs	
Trips:	
Please give details of any visits relating to your	
courses which may require payment	
Other:	
Please specify, giving estimated costs	



## Chelmsford County High School for Girls 16-19 Bursary Guidance and Application

### **Declaration:**

I have read and understand the 2024\_25 16-19 Bursary Fund guidance and confirm that I meet the criteria for the type of bursary that I am applying for. The information contained within my application is accurate and true, and I understand that the school may carry out checks to verify the evidence provided and may take action deemed appropriate if any information I have given is proven to be incorrect or false.

I understand that if I do not behave well, fail to adhere to the Sixth Form contract / code, do not meet the expected attendance level or have any unauthorised absence, my Bursary may be withdrawn.

If I leave the Sixth Form at any time within 4 weeks of a Bursary being awarded / paid, I will repay the funds given to me.

The school reserves the right to ask at the end of Year 13 for the return of books or equipment purchased with bursary money.

Name of Student:		
Student Signature:	Date:	
Parent/Carer Signature:	Date:	

#### **Data Protection Act**

### I understand that:

The data contained on this form will be held on file for seven years and that Chelmsford County High School may make enquiries about the validity of the information provided on this form from other central and/or local government bodies, as deemed appropriate by the school.

I hereby consent to the disclosure of any information sought in accordance with the application for the purposes of the Data Protection Act 1998 and the General Data Protection Regulation May 2018.

The school has a duty to protect the public funds it administers and to this end may use the information provided on this form within this Authority for the prevention and detection of fraud. It may also share this information with other bodies administering public funds solely for these purposes.

Name of Student:		
Student Signature:	Date:	
Parent/Carer Signature:	Date:	