

Application for Financial Support 2020/2021



College support funds are available to provide financial support to eligible students. Please read the Guidance for Applicants before you complete this form. This money is intended to help students participate in education where there is a financial barrier.

SECTION 1: YOUR PERSONAL DETAILS – PLEASE COMPLETE USING BLOCK CAPITALS

First Name:	<input type="text"/>	Surname:	<input type="text"/>	
Address:	<input type="text"/>			
	<input type="text"/>			
	<input type="text"/>	Post Code:	<input type="text"/>	
Date of Birth:	<input type="text"/>	Male:	<input type="radio"/>	
		Female:	<input type="radio"/>	
Age on 31 August:	<input type="text"/>	Contact Number:	<input type="text"/>	
Email:	<input type="text"/>			
Course you are currently attending:	<input type="text"/>			
Do you have an EHCP?	Yes:	<input type="radio"/>	No:	<input type="radio"/>

SECTION 2: BENEFITS STATEMENT

Please note that if you are in receipt of benefits and are successful in your application for the Discretionary Bursary you MUST inform the department for Work and Pensions.

SECTION 3: DETAILS OF ELIGIBILITY

You must include the evidence stated below when you submit your application. All evidence must be dated within 12 months of the date of application. Failure to provide this evidence will result in a delay in processing your application. Please tick ALL criteria which apply to you and supply the appropriate evidence.

ESFA VULNERABLE BURSARY AGES 16 TO 19

- **In care (looked after by local authority)**
Evidence Required: Letter from local authority or social worker
- **Leaving care**
Evidence Required: Letter from local authority or social worker
- **Income Support or Universal Credit in place of Income Support in your own name.**
Evidence Required: Benefit letter dated within 12 months showing name, address and benefits received
- **Employment and Support Allowance (or Universal Credit) and Disability Living Allowance or Personal Independence Payments in your own name**
Evidence Required: Benefit letter dated within 12 months showing name, address and benefits received

DISCRETIONARY BURSARY & FREE SCHOOL MEALS

These can be in student or parent/principle carer's name (Based on means tested benefits).

- **Income Support**
Job Seekers Allowance (Income related)
Employment Support Allowance (Income related)
*Evidence Required: Letter from DWP dated within the last 12 months,
Letter from the JobCentre Plus confirming benefits dated within the last 12 months*
- **Support under Part VI of the Immigration and Asylum Act 1999**
Evidence Required: Letter from Immigration Service or Local Council
- **Universal Credit (with net earnings not exceeding the equivalent of £7,400pa for Free School Meals)**
Evidence Required: Letter from DWP dated within last 12 months
- **In receipt of Child Tax Credit (provided you are not entitled to working tax credit) and have an annual gross income of no more than £28,000 OR Working Tax Credit run on (paid for 4 weeks after someone stops qualifying)**
Evidence Required: Tax Credit Award notice for 2019/2020
- **The guarantee element of State Pension Credit (Free School Meals Only)**
Evidence Required: Letter from DWP dated within the last 12 months
- **Low Household income (Under £28,000) (Discretionary Bursary Only)**
Evidence Required: Family P60, 3 months wage slips and bank statements or P60, Tax Credit Award notice for 2019/2020
- **Exceptional circumstances, Extreme financial hardship or emergency (Discretionary Bursary Only)**
Evidence Required: Evidence of barriers stopping access to education and evidence of a financial need

PLEASE NOTE: WE ARE UNABLE TO ACCEPT ANY INCOMPLETE APPLICATIONS OR THOSE WITH NO EVIDENCE.

SECTION 4: WHAT ASSISTANCE ARE YOU APPLYING FOR?

Please select what financial support you are applying for:

- **ESFA Vulnerable Bursary**
Age 16 to 19 only
Up to £1200 dependent on attendance and behaviour
- **Lunches**
£3.50 per day
- **Travel**
Actual cost of journey
- **Please confirm if you have a Freedom Pass** Yes No
- **Equipment**
Educational/training equipment and support (must support your education)
Please state what equipment/support you are applying for
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ORCHARD HILL COLLEGE WILL TAKE INTO CONSIDERATION THE NUMBER OF APPLICANTS WHEN DECIDING ON THE AMOUNT OF BURSARY TO BE AWARDED AND MAY ONLY PROVIDE A CONTRIBUTION TOWARDS ANY EQUIPMENT REQUESTED.

SECTION 5: DECLARATION

- **I certify that I have read and understood Financial Support Guidance 2020/2021**
- **I certify that the information I have given on this application form is true and accurate**
- **I understand that the information given on this form may be shared with other departments within the College**
- **I agree to inform the College immediately if I withdraw from my course. I understand that if I do withdraw that I may be liable to pay back all or some of the monies and/or equipment awarded to me or the College on my behalf.**

Print Name:

Signature:

Date:

Relationship to student (if applicable):

SECTION 6: POWER OF ATTORNEY

If you wish any payment to be made to someone other than the student, you must provide proof that they are responsible for the student's finance such as Power of Attorney. This can include a letter from the Department of Work and Pensions. (Please enclose this with the application form).

Payment made to :

SECTION 7: PAYMENT DETAILS

Please complete the details below so that we can process your payment vis BACS

Name of Bank or

Building Society:

Account Holder:

Sort Code:

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Account Number:

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Please complete and return this form to:

**Student Services Team
Orchard Hill College
Quadrant House
The Quadrant
Sutton
SM2 5AS**