

16-19 BURSARY & FREE MEALS APPLICATION 2022-23 ACADEMIC YEAR (NCD/NCP)

Bursary Applications will only be successful if gross household assessed income is £30,000 or below including Tax Credits. If in receipt of Universal Credit assessed net income should be £23,000 or below to qualify.

Applications may take up to 4 weeks to process. Late applications will be paid pro-rata based on the remaining term weeks in the academic year. If successful, you will be notified of the payment amounts and dates on your decision letter.

1.	STUDENT PERSONAL DETAILS						
Full Name:							
	ID No:			Da	Date of Birth:		
	Address:						
				_ Po	st Code:		
	Contact No:			_ Ag	e at 31 A	ugust 202	2:
2.	STUDENT BANK ACCOUNT DETAILS: (to be completed by the student)						
	You must provide us with details of your own bank account. If you <i>do not</i> currently have a bank account in your own name you should arrange to open one with a bank or building society <u>before</u> submitting this application. Payments cannot be made into an account in any other name.						
	Name of account holder:						
	Account Number (8	digits):					
	Sort Code (6 digits):] - [
	Building Society roll	number (if applicable	e):				
3.	3. FINANCIAL NEEDS ASSESSMENT						
	If your application is	f your application is successful, please tick the areas that the funds will be used for (tick all that apply)					
	Meals Essent Equipm	& To/From	Course Trips		views / n Days	Other	There is currently nothing I need
	If you ticked that you require financial support with travel costs, please indicate below how you intend to travel to college on most days (tick one option)						
	Walk/cycle	College bus	Public bus/tra	ain	Car/Tax	i	Other
If you ticked Other to either question above, please provide details below;							

4.	ARE	OU ELIGIBLE FOR AN ENHANCED BURSARY?				
		You may be considered for an enhanced bursary if any of the following applies to you. Please tick any relevant statement(s), if applicable:				
I am currently in care (<i>letter from Social Worker required as evidence</i>);						
		I am a care leaver (letter from Social Worker required as evidence);				
		I receive Income Support or Universal Credit because I am financially supporting myself or financially supporting myself and someone who is dependent on me and living with me such as a child or partner;				
		I receive Disability Living Allowance (DLA) or Personal Independence Payments (PIP) in my own right as well as Employment and Support Allowance or Universal Credit in my own right. <i>(you must be in receipt of both benefits and provide evidence for each one).</i>				
IF TICKED COMPLETE THE REMAINING SECTIONS YOURSELF						
5.		TION 5-8 TO BE COMPLETED BY PARENT / GUARDIAN DENTS ONLY TO COMPLETE IF TICKED IN SECTION 4				

OTHER CHILDREN (aged under 18)

6.

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
Your Full Name:		·
Relation to Student:		

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

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

8.	INCOME* (see note below)					
	PLEASE TICK TO INDICATE ALL THE INCOME THAT YOU RECEIVE (tick all boxes that apply)					
	Earnings:					
	Full / Part-time wages (Myself)	Yes				
	Full / Part-time wages (My Partner)	Yes				
	Self-Employed (provide copy of 2021/22 accounts)	Yes				
	Other Income:					
	Do you receive any benefits/tax credits/other income? YES / NO. If YES, tick all that apply;					
	CHILD/WORKING TAX CREDIT (provide ALL pages of 2022/23 Award Notice)	Yes				
	UNIVERSAL CREDIT (provide latest 3 months of Award Notices)	Yes				
	INCOME SUPPORT (provide letter/bank statement dated within last 6 months)	Yes				
	JOB SEEKERS ALLOWANCE (provide letter/bank statement dated within last 6 months)	Yes				
	INCAPACITY BENEFIT / EMPLOYMENT AND SUPPORT ALLOWANCE (provide letter/bank statement dated within last 6 months)	Yes				
	PENSIONS (including Retirement, Disability, Widow's, Army, Other) (provide	Yes				
	letter/bank statement dated within last 6 months)					
	SUPPORT UNDER PART VI OF THE IMMIGRATION AND ASYLUM ACT 1999	Yes				
	ANY OTHER INCOME e.g. Carers Allowance (provide relevant evidence)	Yes				
	Please state type of income:					
	*Evidence for ALL income must be included with your application and must be dated within the last months. Applications submitted without evidence will be returned.					
	Please submit photocopies as originals will not be returned.					

9.	UNDERTAKING BY STUDENT AND PARENT / GUARDIAN				
	a) I declare that the evidence given in support of my application is correct and complete to the best of my knowledge and belief and I authorise the college to verify the information stated.				
	b) 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.				
	 c) I understand that if this application is successful, payments will be subject to evidence of effort good attendance and work performance (payments will be withheld if I am placed on a Senio Management contract or above) 				
	Sign (Student):		Date:		
	Sign (F	Parent/Guardian):	Date:		
is rec for th	quired a le preve	tion provided on this form is confidential and will only be seen b and will only be used to process your 16-19 Bursary Fund and F ention of fraud.	Free Meals Application and		
If false or incomplete information is submitted, or if you do not inform college of any part of your income that is relevant, the matter may be referred to the Department for Education or the police. You could face prosecution and college will seek to recover any payments that you are not eligible.					
10.	APPLI	ICATION CHECKLIST			
	Please ensure that the application is completed fully and correctly and includes all the required evidence. Failure to do so will result in the application being returned to you and the assessment being delayed. Please make sure that you have:				
	Completed all relevant sections				
Included photocopied evidence for all income.		Included photocopied evidence for all income.			
If claiming <u>universal credit</u> include copies of your last 3 mo		If claiming tax credits include all pages of your most recent av	vard letter.		
		If claiming universal credit include copies of your last 3 month	ns statements.		
		(If you have been on universal credit less than 3 months, pleas statements and include a note of the start date).	se include all available		
		If you are <u>self-employed</u> include a copy of your 2021/22 annua	al accounts		
		Provided the student's own bank account details in section 2			
		Signed and dated section 9 by both student and parent/guard	ian (if applicable)		
	RETURNING YOUR APPLICATION The initial deadline for applications is 26 August 2022, applications can be returned; By hand to Student Services (Pontefract) or Reception (Doncaster and Bradford). By post; please ensure that you have paid the correct postage for the weight/size of the envelope. Applications should be posted to:				
	Bursar	ry Application, New College, Park Lane, Pontefract, WF8 4QR.			
	lf you l	have any queries regarding this application please email them t	to: studentfinance@nclt.ac.uk		