



**The Robert Carre Trust**  
**16 – 19 Bursary Fund**  
**Application Form 2015/2016**

Having read the information regarding the 16 – 19 Bursary I would now like to make an application for your consideration.

**Please complete the form and bring it together with your supporting evidence.**

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

Email: \_\_\_\_\_

FORM: \_\_\_\_\_      DATE OF BIRTH: \_\_\_\_\_

*(Please note that the value of awards is at the discretion of the school and may vary between applicants).*

**Please provide your bank details below as printed on your bank card or statement.**

**Bursary payments will be paid directly into learners' bank accounts only (by BACS). Please be aware that providers can choose to pay Bursary awards 'in kind', e.g. by purchasing any equipment required or providing a travel pass**

Account Name .....							
Account Number							
Sort Code	— —						

SIGNED: \_\_\_\_\_      DATE: \_\_\_\_\_



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## **Discretionary Bursary Criteria**

Your household income is one of the criteria which will help us to assess your application.

**What is the total income in your main home ?**      £

## **Are you claiming or currently applying for any benefits ?**

Please specify which ones and where you are in the application process.

Please tick one of the following to show what type of evidence you have provided. If you cannot provide evidence then we cannot process your application for bursary payments.

P60	Income Support / Universal Credit (award letter)	Tax credit award
Self-employed earnings (official tax return)	Other benefits/pension (award letter)	Wage slips (most recent wage slip)

The amount of financial assistance you will receive is dependent on your personal circumstances. **Please briefly explain your family circumstances, indicating why you should be considered for bursary.**

This information is strictly confidential and will be used for assessment purposes only.



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Please tell us what you will need financial assistance for and how much you believe you will need

Travel	£
Meals	£
Appropriate clothing	£
Educational Books	£
Educational Equipment	£
Educational Visits	£
Higher Education Interview Expenses	£
Other (please specify )	
<b>Total Amount Requested</b>	<b>£</b>

**Declaration**

All of the information provided on this application form is accurate and no information has been withheld that would be relevant to my request for financial assistance.

Signature of Student :

Signature of Parent/Guardian :

Date

**For School Use**

Date of Consideration :

In Attendance			
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Approved/ Refused

Amount of Award	£
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**Notes:**