



The Robert Carre Trust
16 – 19 Bursary Fund
Application Form 2020/2021

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.

Current Income Support /
Universal Credit (award letter)

Current Tax credit award

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 used for assessment purposes only.

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

Travel

£



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

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: