## Appendix 1



## Ursuline SIXTH FORM FUND 2025-26 APPLICATION FORM 16-19 BURSARY

SERVIAM	Belong and Succeed						
STUDENT'S DETAILS							
FIRST N	AME:	DATE:					
SURNA	ME						
Is the Student in Local Authority care, a Care Leaver or liv		ing with a foster family?	Yes/No				
(If yes, g	go straight to the declaration section)						
DOCUM	IENTARY EVIDENCE FOR INCOME						
RECEIVED YES/NO	Type of income and evidence required	PARENT/CARER 1: AMOUNT RECEIVED (£) PER YEAR	PARENT/CARER 2: AMOUNT RECEIVED (£) PER YEAR				
	Universal Credit (amount per year in the next box) (please provide the three most recent statements)						
	Working Tax Credit (ALL pages of original Tax Credit Award Notice for the last tax year)						
	Child Tax Credit (ALL pages of original Tax Credit Award Notice for the last tax year)						
	Child Benefit (number of children under 18)						
	Income Support (most recent statement)						
	Job Seekers Allowance (most recent statement)						
	Disability Living Allowance (most recent statement)						
	Personal Independent Payment (PIP) (most recent statement)						
	Pension (Credit/Employer's/Widow's) (most recent statement)						
	Child support/maintenance payments						
	Employment (most recent P60)						

9	Self-emplo	yed (latest filed accounts)						
	Other sour etc)	rce of income (e.g. property, shares						
		TOTAL GROSS HOUSEHOLD INCOME	£	£				
You must	You must provide ALL the above documents which apply. Please provide original documents.							
<b>ALL</b> pages of these documents must be provided. We may ask for further evidence depending on individual circumstances. It is a serious offence to give false information and will lead to permanent exclusion. We have a duty of care to protect the public funds we control. We may use the information you have provided on the form to detect and prevent fraud. We will also share this information with other organisations which control public funds. Your application will be treated with confidentiality and other students will not be aware that you have applied/are receiving financial assistance.								
I confirm that I have a UK bank account in my own name where payments can be received.								
Bank Nam //_	nk Name: Sort Code: /							
To be eligible to receive help form the 16-19 Bursary Fund you must have been ordinarily resident in the UK for the past three years. Please enter the date you entered the UK.								
PARENT/0	CARER/ST	UDENT DECLARATION						
I/We understand it is our responsibility to notify Ursuline High School immediately if there are any changes in our financial circumstances and that failure to do so may be considered as fraudulent. I/We also understand that failure to do so may result in my repaying the bursary payments made from the date of the change.								
I/We understand that giving false or incomplete information that leads to incorrect/overpayment may result in future payments being stopped and any incorrectly paid funds being recovered.								
<ul> <li>Payments are made at the end of each half-term. If you qualify for a bursary, to receive payment:</li> <li>You must be enrolled as a full-time student at Ursuline High School in the Sixth Form.</li> <li>Your attendance must be <u>at least 96%</u> for each half term.</li> <li>You must attend all subject lessons, including PSHE, Independent Learning lessons, general RE and compulsory Sixth Form events.</li> <li>You must show high standards of attitude and behaviour.</li> </ul>								
I/We understand that by not meeting these criteria may result in the half-term payments being withheld.  I/We confirm that the information given on this form is true and correct and I/we agree to the above conditions.								
Adult 1 S	ignature:		Date:					

Adult 2 Signature:			Date:	//			
Student Signature:			Date:	//			
PRIVACY NOTICE							
Ursuline High School complies with the principles of the General Data Protection Regulation (GDPR). By submitting this form, you consent to the Ursuline holding your information. The information being collected may be used for the prevention and detection of fraud and crime and we may, under the Regulation, not require your consent to do so.							
Please return the completed form together with the original supporting documents to:  Ms Suarez, Lead Sixth Form Bursary, Ursuline High School.  Any queries please email <u>Isabel.Suarez@ursulinehigh.merton.sch.uk</u>							
Date received by Le	ead Sixth Form Bursary	//_	_				