

The Thomas Aveling School

16 - 19 BURSARY GRANT APPLICATION

I believe that I am eligible and would like to apply for the grant below (please tick relevant grant) and I have attached relevant and supporting information as requested. I have read the Student Learning Agreement and agree to the terms and conditions as advised.

Name (Capitals): _____ Signed: _____ Dated: _____

GRANT CLAIMED

Please tick as appropriate (✓)

Level 1 Grant.

Level 2 Grant.

Level 3 Grant.

REASON

Please tick as appropriate (✓)

I am in public care.

I receive income support.

I am registered disabled.

I am eligible for free school meals.

My family income is below £16190.

I am a Young carer.

I am unable to fund my current educational need.

SUPPORTING EVIDENCE

Please tick as appropriate (✓)

I am presently in Foster care and enclose a current signed letter from my social worker.

I am presently in Foster care and enclose a confirmation letter from the School SENCO.

I am living in supported accommodation and enclose a current signed letter from the accommodation manager.

I am living alone and enclose a current utility bill and council tax notification to my address in my name.

I enclose a copy of my disability registration.

I enclose appropriate endorsement form Student Services.

I enclose copies of my P60 documents.

I have attached appropriate evidence to support my hardship claim.

For claims for specific educational funds under Level 2 or Level 3 Grants please also complete the following;

Please tick as appropriate (✓)

Cost of transport

Meals

Books & Equipment

Educational Trips/Visits

Other (specify) _____

Please provide specific detail of how you would use the grant money requested;