

# Sheldon School Sixth Form

## Application for 16-19 Bursary Fund - 2025-6

**(New application will be required for Year 13)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Student Surname:** | **Student First name(s):** | **Date of birth** | **No. of dependent children at home** | **Distance to school + mode of transport** |
|  |  |  |  |  |

**Eligibility Checklist (To be completed by the student – please tick):**

* I am a full-time student
* I am 16 years old or over
* I am a UK resident
* I have read the Sheldon Sixth Form 16 – 19 Bursary guidance
* I meet the funding criteria for either Level 1, 2 or 3
* I am able to provide the necessary documentation
* I understand that the 16–19 bursary fund is to be spent on educational activities or resources based on need
* I understand I will need a 1-2-1 with my tutor or a member of the Sixth Form team to discuss my individual ‘barriers to learning’
* I understand that I am required to provide receipts as evidence of appropriate use
* I understand that the information and documentation that I provide is true to the best of my knowledge
* I understand that Sheldon School Sixth Form reserves the right to withdraw access to the Bursary fund if attendance and/or behaviour is not at an acceptable level

**Signed:**

**Print name: Date:**



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## Application for 16-19 Bursary Fund – 2025-6

**(New application will be required for Year 13)**

*Please read the Sheldon School Sixth Form 16-19 Bursary guidance before completing this form*

|  |  |
| --- | --- |
| **HOME ADDRESS:**  **POST CODE:** | |
| **TELEPHONE NUMBER:** |  |

|  |  |  |
| --- | --- | --- |
| **Name of Parent**  **/ Carer**  **in the household where applicant resides:** | **Parent / Carer 1:** | **Parent / Carer 2:** |
| **Employer’s name and address:** |  |  |
| **Please attach latest P60 and 3 most recent payslips or Universal /Tax Credit statements and/or proof of earnings if self -employed.** | | |

**Household Income (Required for Level 2 and Level 3 applications)**

Please include the original supporting documentation with this form. All evidence will be photocopied and dealt with in the strictest confidence. (Please do not send any original documentation in the post).

**£**

**My total household income is:**

**Level required - Please tick which level of payment you are applying for:**

* **Level 1**
* **Level 2**
* **Level 3**

|  |  |
| --- | --- |
| **Level 1** | |
| I am a young person in care |  |
| I am a young care leaver |  |
| I am in receipt of Income Support or Universal Credit in my own right |  |
| I am in receipt of Disability Living Allowance (DLA) or Personal Independence Payments (PIP) in my own right |  |
| I am in receipt of Employment and Support Allowance (ESA) in my own right |  |

|  |  |
| --- | --- |
| **Level 2** | |
| I am in receipt of Free School Meals |  |
| My total household income is less than £18,000 |  |

|  |  |
| --- | --- |
| **Level 3** | |
| My total household income is more than £18,000 but less then £30,000 |  |

|  |  |
| --- | --- |
| **Please indicate any initial areas for support or specific requests. This will be followed up in the 1-2-1 with your tutor or a member of the Sixth Form team.** | |
| Travel costs |  |
| Text books |  |
| Revision guides |  |
| Stationery, folders etc |  |
| Online educational subscriptions |  |
| Subject specific equipment or specialist clothing |  |
| Subsidising essential school trips |  |
| Subsidising university / apprenticeship etc open days |  |

|  |  |
| --- | --- |
| **I certify that the information given on this application form is, to the best of my knowledge and belief, correct.** | |
| **Name & Signature of Applicant:** | **Name:**  **Signature: Date:** |
| **Name & Signature of Parent/Carer:** | **Name:**  **Signature: Date:** |

**COMPLETED FORMS SHOULD BE RETURNED, WITH THE RELEVANT DOCUMENTATION, TO THE SIXTH FORM OFFICE ONLY, AS SOON AS POSSIBLE**