

THE JOHN OF GAUNT SCHOOL

SIXTH FORM

16-19 BURSARY FUND 2016-17

APPLICATION FORM

**Student Details**

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|--|--|
| <b>Full Name</b>   |  |
| <b>Date of Birth</b>   |  |
| <b>Address</b>   |  |
| <b>Telephone Number</b>  |  |
| <b>E Mail Address</b>  |  |
| <b>Who Do You Live With? (Please tick)</b><br>Grandparent(s) <input type="checkbox"/><br>One parent <input type="checkbox"/> Two parents <input type="checkbox"/> One parent and one step-parent/partner <input type="checkbox"/><br>Are you a carer? YES/NO |  |
| <b>Your Parent(s)/<br/>Guardians names and<br/>addresses</b>   |  |

**Parent/Carer details** (to be complete by Parent/Carer)

Parent/Carer's Name:

Are you living with your spouse/partner **YES/NO**

Is your spouse/partner the mother /father of the child mentioned in this application?

Do you have any other children living at home who are financially dependent on you?  
**YES/NO**

Number of children and children's ages



**To Be Completed By Student**

**Course Details for 2015-16**

Please detail which subjects (and levels, e.g. AS/A2 Level, BTEC you will be studying)

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Please fill this section in carefully and ensure the information you provide to us is accurate. The details given here must relate to the **student's own bank account** and not a third party.

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|--|--|
| <b>BANK DETAILS</b>                                |  |
| <b>Name of Account Holder</b>                      |  |
| <b>Name and Address of Bank/Building Society</b>   |  |
| <b>Type of Bank Account (e.g. Current/Savings)</b> |  |
| <b>Sort Code</b>                                   |  |
| <b>Bank Account Number</b>                         |  |

## **Student Declaration**

I agree that payment of the Bursary is dependent upon me meeting the following conditions:

- My attendance should not fall below 95%
- I should attend all required registrations
- I must ensure that I am punctual to all lessons and registration
- I will get permission in advance if I need to take time off (all absences must be authorised)
- I must abide by the School Behaviour Policy
- I must abide by the Sixth Form Learning Agreement

I understand that failure to do so may result in the award being withdrawn.

I understand that if I leave before I complete my course I may be required to repay all or part of my award and return any books or equipment

I agree to inform the Head of Sixth Form if my household financial circumstances change.

**Signed**.....

**Date**.....