Fullbrook 6

16-19 Bursary Fund (Vulnerable) Application Form 2026-27

SECTION 1 – STUDENT DETAILS (please print details and complete in black ink)

Student Name:
Date of Birth:
Mobile Telephone number:
Email:

SECTION 2 – Are you applying for: (please tick appropriate box)

☐ Vulnerable Bursary – please complete sections 3,4,5 & 6

Note: Students will not automatically be awarded £1,200 if it is deemed that they do not require the full amount or indeed do not require financial support. Equally, more than £1,200 may be awarded if it is deemed that a student needs extra help to remain in education.

SECTION 3 – Vulnerable 16-19 Bursary –

This funding is available to students who are in one of the following categories (please tick the appropriate box):

☐ In care

☐ Care leavers

☐ Receiving Income Support (IS) or Universal Credit (UC) in their own name because they live apart from their parents, their parents have died, or they are parents themselves

☐ Disabled and receive both Universal Credit (UC) (or Employment and Support Allowance (ESA)) & Disability Living Allowance (DLA)

Note: Vulnerable bursary awards are made to help students with the cost of items or travel required to allow them to participate. Each award will be based on each student's individual circumstances and actual financial need.

SECTION 4 – Evidence of Eligibility

To support the declaration of category in 2 and 3 above appropriate evidence (photocopies accepted) must be provided for an assessment to be made.

☐ In Care or a Care Leaver: written confirmation from your Local Authority

☐ In receipt of UC or IS: a copy of the award notice that clearly states the student's name

☐ In receipt of UC/ESA and DLA/PIP: a copy of the UC/ESA award notice that clearly states the student's name and evidence of the receipt of DLA/PIP

SECTION 5 – Student Bank Account Details
(You should check that your bank account can accept BACS direct credits)

Bank Name (e.g. Santander, Barclays)
Name of Account Holder:
Sort Code:
Account Number:

SECTION 6 – Declaration
Please read the declaration below carefully before signing:

1. **I have read and understand that Fullbrook 6 Application Help Notes and Statement of Conditions for the administration of the 16-19 Bursary Fund.**
2. **I declare that the statements made on this form are true and to the best of my knowledge and belief and are correct in every respect. I undertake to supply any additional information that may be required to verify the particulars given. I understand that if I refuse to provide information relevant to my claim, the application will not be accepted.**

Signed**: ……** Date: **……**

Fullbrook Finance Department to complete

☐ I confirm that I have seen evidence required in Section 4.

☐ I confirm that the applicant satisfies the eligibility criteria as outlined in the 16-19 Bursary Fund policy 2026/2027.

Signature …… Date ……

Please return to F6 Student Support Officer