

16 to 19 Discretionary Bursary Fund Application Form 2020/21

The discretionary bursary is intended for those students facing genuine financial barriers to participation and is awarded at the discretion of Chiltern Way Academy. Students wishing to be considered, will need to apply each year and are encouraged to apply in mid-June for the following academic year. Meeting any of the criteria does not guarantee payment of the bursary if the student's financial needs have already been met by other sources. If the application is successful, the school will decide the amount to be awarded and purchase specified items directly on behalf of the student.

Student Details

Surname	
Forenames	
Date of Birth	
Address	
Postcode	

Parent/Carer Details

Surname	
Forenames	
Address	
Postcode	
Tel. no.	
Total Household Income Amount	

I/We wish to apply for the discretionary bursary fund because:

Please tick all that apply

My household income is less than £30,000 (<i>approximately</i>)	
Student was eligible for Free School Meals in Year 11 or is currently eligible	
My household is in receipt of other means tested benefits	
There are (<i>specify no.</i>) dependent children in the student's household	

Appropriate Department of Work and Pensions/other relevant documentation must be attached to the application form as evidence of income. (Please refer to the 16-19 Bursary Fund Policy for Chiltern Way Academy, provided with this application form for acceptable forms of evidence.)

CEO: Mr Ian McCaul

Wendover Campus, Church Lane, Wendover, Buckinghamshire, HP22 6NL. Tel: 01296 622157
 Prestwood Campus, Nairdwood Lane, Prestwood, Great Missenden, Buckinghamshire, HP16 0QQ. Tel: 01494 863514
 Berton Campus, 3 Berton Road, Aylesbury, Buckinghamshire, HP20 1EE. Tel: 01296 622157
 Email: office@chilternway.org

I/We would like to apply for financial assistance towards:

Specify item(s) required to participate	£ Amount applied for
Total claim	

I/We confirm I/we have legally lived in the UK for the last 3 years.

I/We have read and agree to the conditions in the 16-19 Bursary Fund Policy for Chiltern Way Academy.

I/We confirm that the information and evidence that I/we have provided is accurate and complete and that any overpayments that are made as a result of giving false or incomplete information may be recovered by the school. I/We will notify the school if there is a change to my/our financial circumstances.

Student signature: Date:

Parent/Carer signature: Date:

The information provided on this form will be treated in the strictest confidence and is covered by our Data Protection Policy and Privacy Notice available on our website.

For office use	
Supporting evidence received (copies retained)	
Date application reviewed	
Decision on award and reason	
Bursary amount awarded	

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