



The Cardinal Wiseman Catholic School Sixth Form



16 – 19 Bursary Application Form

Please ensure that you have read the Bursary Fund Statement before you complete this form. **Please check that you are eligible to apply for this fund and can provide the necessary evidence to support your application.** If you have questions or difficulties completing this form, please contact the Sixth Form Administrator, Mrs Kothari kotharis@wiseman.ealing.sch.uk.

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|--------------|-----------------------|
| Student Name | Student Date of Birth |
| | |

Please circle the type of Bursary you are applying for:

| | |
|---|--|
| <p>1. Vulnerable Bursary:</p> <ul style="list-style-type: none"> • Young person in care OR • Care leaver OR • Young person in receipt of income support or universal credit OR • Disabled young person in receipt of DLA or PIP as well as ESA or UC | <p>2. Discretionary Bursary:</p> <ul style="list-style-type: none"> • Type A: A student in receipt of Free School Meals • Type B: A student living in a household with total income below £25,000 per annum • Type C: A student facing financial hardship |
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Please give a summary of the evidence attached to support your application:

We declare that all information supplied to the school, LA or third party is correct and true. We undertake to inform all parties of a change of circumstance that would affect our eligibility to Bursary Funding immediately and to return all monies incorrectly claimed.

Student signature:.....Student Mobile:.....

Student Email:.....

Parent/Carer signature:.....

Please print parent/carers name and telephone number:

Name:..... Parent Mobile.....

Date:.....