

Please complete this form in **BLOCK CAPITALS** and return with the required evidence to:  
Student Services, Bishop Burton College, York Road, Bishop Burton, HU17 8QG

## Check your application. Have you...?

	✓
• Answered every question	
• Provided photocopies of all the evidence required	
• Is the form signed and dated by you	

## Section A: Student's Details

<b>Surname:</b>		<b>Forename(s):</b>	
<b>Address:</b>		<b>Student Number:</b>	
		<b>Date of Birth:</b>	
		<b>Your age on 31/08/2024:</b>	
		<b>Course Title:</b>	Year: 1 or 2
<b>Postcode:</b>		<b>Email address:</b>	
<b>Home Telephone No:</b>		<b>Mobile Telephone No:</b>	

Please list all the residents in your household and their relationship to you:

Name and Date of Birth	Relationship to student

Please answer the questions below stating yes or no. If you answer yes to any of the questions, please submit the requested evidence. **If you answered yes to any of the questions below, you can proceed to Section C. If you answered no to all questions then please proceed to Section B.**

Is the student or has the student been in the Local Authority care system for more than 13 weeks since the age of 14 years old? (Evidence: Confirmation from Local Authority confirming your status)	Yes / No
Is the student currently in receipt of BOTH Employment Support Allowance AND Disability Living Allowance / Personal Independence Payments or Universal Credit in my own name? (Evidence: Award letters dated within the last 3 months <b>AND</b> a Bank Statement within the last 3 months)	Yes / No
Is the student currently in receipt of Income Support or Universal Credit? (Evidence: Award letter dated within the last 3 months <b>AND</b> a Bank Statement within the last 3 months)	Yes / No
I receive Universal Credit because I financially support myself? (Evidence: Award letter as above <b>AND</b> documentation to confirm your independent status e.g. Tenancy Agreement, Utility bills etc.)	Yes / No

**Please note:** Students who met the criteria for the Vulnerable Bursary are not automatically entitled if they do not have financial need and/or their financial needs are covered by other means.

## Section B: Household Income

**This section should be completed by the student.**

Please enter your total gross income from all sources for the year ended 5<sup>th</sup> April 2024 in the table below. Please input YOUR personal income and your partner's if applicable.

Income Source	Evidence Required	Student	Partner (Complete if student lives with only partner)
Total earnings as employee	P60 for 2023/2024 or March 2024 payslip	£	£
Total income from self-employment	Business accounts for 2023/2024, declaration from accountant or self-assessment tax return for 2023/2024	£	£
Taxable benefits (e.g. company car)	P11D for 2023/2024	£	£
Income from savings and investments exceeding £10,000	Value of income as at 5 <sup>th</sup> April 2024	£	£
Income from property	Value of income as at 5 <sup>th</sup> April 2024	£	£
Trust, settlements and estates	Value of income as at 5 <sup>th</sup> April 2024	£	£
Pensions	P60 for 2023/2024, annual statement or current entitlement letter from relevant agency	£	£
Any other income	Value of income as at 5 <sup>th</sup> April 2024	£	£

If you have received any state benefits during the period 6<sup>th</sup> April 2023 – 5<sup>th</sup> April 2024 please enter your yearly income in the table below.

Benefit	Evidence which <b><u>MUST</u></b> be provided	Student Annual Income (2023-24)	Partner Annual Income (2023-24) (Complete if student lives with only partner)
Income Support	Income Support Letter OR 3 months bank Statements	£	£
Universal Credit	3 most recent Universal Credit Statements <b><u>INCLUDING DEDUCTIONS</u></b>	£	£
Jobseeker's Allowance	Jobseekers Allowance Awards letter OR as Evidenced on Universal Credit Statements	£	£
Employment Support Allowance	Employment Support Allowance Awards Letter OR 3 months bank statements OR as Evidenced on Universal Credit Statements	£	£
Working Tax Credit	<b><u>ALL</u></b> pages of Tax Credits Awards Letter OR as Evidenced on Universal Credit Statements	£	£
Child Tax Credit	<b><u>ALL</u></b> pages of Tax Credits Awards Letter OR as Evidenced on Universal Credit Statements	£	£
Child Benefit	Child Benefit Awards Letter OR 3 months bank statements	£	£
Child Maintenance	Child Maintenance Awards Letter OR 3 months bank statements	£	£
Carer's Allowance	Carers Allowance Awards Letter OR 3 months bank statements	£	£
Disability Living Allowance (DLA)/Personal Independence Payments (PIP)	DLA/PIP awards letters OR 3 months bank statements	£	£
Pension Credits	Pension Credits Awards Letter OR 3 months bank statements	£	£
Other Income	Evidence of Other Income	£	£

Please provide a copy of your award letters for the benefits you have stated that you receive in the table above dated between April 2023 and April 2024. This must clearly show the payee's name, address, type of benefit and amount payable.

Alternatively, a completed F2A form which has been stamped and signed by the benefit agency for every benefit that you are in receipt of and have stated above may be submitted.

If you cannot provide evidence then we cannot process your application. If you have any queries then please email [bursaries@bishopburton.ac.uk](mailto:bursaries@bishopburton.ac.uk)

### Section C: Student's Bank or Building Society Account Details

Name of Bank	
Full name of account holder (student)	
Sort code (6 digits)	
Account number (8 digits)	
Roll number (building society only)	

### Section D: Declaration

I declare that the information on this form is true and accurate to the best of my knowledge. I will supply any additional information that may be required to verify the information given in Section B. I understand that if I refuse to provide information relevant to my claim the application will not be accepted.

I will inform the College of any changes to any of the information stated in Section B in writing. I agree to repay the College immediately and in full if the information I have given is shown to be false or deliberately misleading.

I confirm that I consent to the College seeking information from the Local Authority to confirm information regarding my status as a care leaver or my eligibility for free school meals. I am aware that information will only be requested if necessary and that all information will be treated in a confidential manner in respect of this application only.

I am aware that the funding covers only this academic year and that I must re-apply next year; there is no guarantee that I will receive funding for future years even if I am eligible for the current year.

I understand that I do not have an automatic entitlement to Bursary payments and all payments are based on the information provided.

I understand that if I leave my course throughout the year any ongoing funding may be withdrawn and I will still be responsible for any outstanding debts to the College.

I understand that any support agreed is dependent on satisfactory attendance of 85% or above, behaviour and progress.

**In signing this application, you confirm that you have read and agree to the Terms & Conditions.**

Signature of student:

Date: