



# 16-19 Study Programme Bursary Fund Application Form



**Unity in  
Community**



# **16-19 BURSARY APPLICATION FORM**

Please write in **BLOCK CAPITALS** when completing the form

## **TRAINING PROVIDER**

<input type="checkbox"/>	<b>Goodwin Development Trust</b>
<input type="checkbox"/>	<b>Niche Education and Training Ltd</b>
<input type="checkbox"/>	<b>Unity in Community</b> (Northern Hull Community Development Limited)

## **SECTION 1 – APPLICATION INFORMATION**

### **Learner Details**

<b>Surname / Family Name</b>	
<b>First Name(s)</b>	
<b>Date of Birth</b> (dd/mm/yyyy)	
<b>Age on 31<sup>st</sup> August 2025</b> <i>You must be at least 16 years old but under 19 on 31 August 2025 to apply, unless you have an EHC plan.</i>	

### **Address Details**

<b>Home Address</b>	
<b>Postcode</b>	
<b>Home Telephone Number*</b>	
<b>Mobile Telephone Number*</b>	
<b>Email Address*</b>	

\*At least 1 must be provided

### **Bank or Building Society Account Details**

*The account details provided must be held by the bursary applicant (learner). Please provide the name as it appears on your debit card or statement. You will also be required to submit a copy of your most recent statement to confirm the below details.*

<b>Full Name of Account Number</b>	
<b>Name of Bank/Building Society</b>	
<b>Sort Code</b> (XX-XX-XX)	
<b>Account Number</b> (8 digits long, not the long number)	

### Alternative payment arrangements

If you are unable to receive payments directly to an account in your name, and have a separate arrangement with your training provider, please provide the details below:

### Delivery partner confirmation

Please provide detail of the arrangements you have made with this learner. This includes conditions of payment, payment schedule, how it will be paid (cash, bus tickets etc.)

## SECTION 2 – BURSARY SELECTION

In this section you need to indicate which bursary awards you wish your application to be considered against by ticking the appropriate box. Details of what evidence you will be required to supply to support your application is also included here. This evidence must be attached to your application on submission. Please follow the instructions and complete any further sections of this document as instructed.

<b>Fund A - Vulnerable Bursary Award</b>	
I wish my application to be considered under the Vulnerable Bursary. Please tick one of the following, and supply the below evidence	
<b>I am a young person in care or a care leaver</b>	<input type="checkbox"/>
<b>Evidence Submitted:</b> Written confirmation of current or previous LAC status from relevant Local Authority	
<b>I am a young person on Income Support</b>	<input type="checkbox"/>
<b>Evidence Submitted:</b> Copy of Income Support award notice – this includes evidence that you are entitled to the benefit in your own right and confirms that you can be in Further Education or training.	
<b>I am a young person on Universal Credit</b>	<input type="checkbox"/>
<b>Evidence Submitted:</b> Copies of the Universal Credit Award notice from the last three months – this includes evidence that the student is entitled to the benefit in their own right.	
<b>I am a young person on Disability Living Allowance AND Employment Support Allowance</b>	<input type="checkbox"/>

<b>Evidence Submitted:</b> Copy of entitlement/Award letter dated within the last 3 months	
<b>I am a young person on Personal Independence Payments (PIP) AND Employment Support Allowance</b>	<input type="checkbox"/>
<b>Evidence Submitted:</b> Recent letters showing you are in receipt in your own right.	
Further clarification of information provided may be requested. Now complete Section Four and Five of this form.	

<b>Fund B - Discretionary Bursary Award</b>		
I wish my application to be considered under the Discretionary Bursary.		
<b>Household Details</b>		
This section must be completed for the Discretionary Bursary. <b>Parents/carers of the applicant should complete this section.</b>		
<b>Household members</b> - Please provide details of all residents who contribute to household income.		
	<b>Full Name</b>	<b>Contact Number</b>
<b>Applicant</b>		
<b>Father</b>		
<b>Mother</b>		
<b>Carer</b>		
<b>Other</b>		
Please tick one of the following:		
<input type="checkbox"/>	I am a young person who has a total household income of less than £16,190 applying for a Discretionary Bursary Award (Free school meals claimed via LA).	
<input type="checkbox"/>	I am a young person who has a total household income of £16,190 to £25,800 applying for a Discretionary Bursary Award	
Now complete Sections Three, Four,		

### SECTION 3 – DISCRETIONARY EVIDENCE

Further clarification of information provided may be requested.

Type of income	Annual Income (£)	Evidence Required	Evidence Provided (√)
Income Support*		Entitlement/Award letter dated within the last 3 months	<input type="checkbox"/>
Income-based Job Seekers Allowance*		Entitlement/Award letter dated within the last 3 months	<input type="checkbox"/>
Income-related Employment Support Allowance (ESA)*		Entitlement/Award letter dated within the last 3 months	<input type="checkbox"/>
State Pension Credit – Guarantee Element*		Entitlement/Award letter dated within the last 3 months	<input type="checkbox"/>
Child Tax Credit*		Entitlement/Award letter dated within the last 3 months	<input type="checkbox"/>
Universal Credit*		Entitlement/Award letter dated within the last 3 months	<input type="checkbox"/>

Support under part VI – Immigration and Asylum Act 1999*		Relevant paperwork detailing entitlement	<input type="checkbox"/>
Working Tax Credit 4-week run-on only*		Relevant paperwork detailing entitlement	<input type="checkbox"/>
Annual Salary		P60 for previous tax year or employer letter confirming annual salary or week 52 payslip (March) Self-employment – company registration, or tax return form	<input type="checkbox"/>
Incapacity Benefit		Entitlement/Award letter dated within the last 3 months	<input type="checkbox"/>
Carer’s Allowance		Entitlement/Award letter dated within the last 3 months	<input type="checkbox"/>
Housing Benefit		Entitlement/Award letter dated within the last 3 months	<input type="checkbox"/>
Working Tax Credit		Working Tax Credit Full Award notice for the current year. Must be for full year and not partial awards	<input type="checkbox"/>
Child Benefit		Award Letter or entry on last bank statement	<input type="checkbox"/>
Grants or Bursaries etc.		Relevant paperwork detailing entitlement and amount paid	<input type="checkbox"/>
Any Other Income		Relevant paperwork detailing entitlement and amount paid	<input type="checkbox"/>
<b>Total Income</b>			

\* Free school meals qualifying benefits. Note - Universal Credit: Maximum net earnings £7,400 and Child Tax Credit: maximum gross income £16,190 with no Working Tax Credit entitlement.

If you receive more than £1233.34 in Universal Credit you will be required to submit 3 recent UC award statements.

## SECTION 4 – SUPPORT REQUEST

### Travel

(√)	Mode	(√)	Duration	(√)	Ticket type	Cost of ticket*
	Bus		Days per week		Daily Ticket	£
	Train		How many weeks		Weekly Ticket	
<b>Additional information that may support your application:</b>						
<b>Total requested: £</b>						

### Meals

(√)	Purchase	(√)	Duration	Cost Per Day*
	Purchase myself		Days per week	£
	Bought by Training Provider		How many weeks	

<b>Additional information that may support your application:</b>
<b>Total requested: £</b>

\*Your bursary will be capped at this amount, unless your training provider puts in a request on your behalf to increase the amount. This will be assessed by HLC and approved subject to available funds.

**Other Equipment**

Qty	Item	Cost
		£
		£
		£
<b>Additional information that may support your application:</b>		
<b>Total requested: £</b>		

**SECTION 5 – BURSARY FUND AGREEMENT AND DECLARATION**

Please read the declaration below carefully before signing:

**AGREEMENT**

By signing this agreement, you agree to:

- Abide by your Training Providers agreements and expectations including behaviour, punctuality, attitude to learning and 95% attendance\*
- You will inform your training provider of any change in circumstances, if significant, that may affect your eligibility to claim the bursary

*\*Consideration will be given to individual student circumstances.*

Failure to adhere to these requirements could result in non-payment or the suspension of bursary support. If you wish to complain/appeal against the non-payment of your bursary you must speak with your Training Provider who will explain the procedures for this.

**To administer the fund, your Training Provider will:**

- Keep records of your attendance
- Monitor your attendance and any absence
- Process and pay bursary payments as detailed in your acceptance letter
- Inform you if any part of your bursary payment has been stopped
- Respond to any queries or problems that you wish to discuss about the bursary

- Consider any changes in your circumstances and clarify with you how this will affect your bursary

## DECLARATION

1. I declare that the statements made on this form are true and to the best of my knowledge and belief 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. I also undertake to inform HLC of any alteration to any of the particulars in writing. I agree to repay HLC in full and immediately any sums advanced to me if the information I have given is shown to be false or deliberately misleading.
2. 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.
3. I confirm that I have read and understood the content of the Bursary Policy and agree to comply with requirements set out by HLC and my training provider. Please visit our website for details: <https://www.hlc-vol.org/our-programmes/1619-study-programme/>

## Signatures (required for all bursary applications)

Learner Name (PRINT):

Learner Signature:

Date:

Parent/Guardian Name (PRINT):

Parent/Guardian Signature:

Date:

Parent/Guardian Name (PRINT):

Parent/Guardian Signature:

Date:

## TRAINING PROVIDER CHECKLIST

Funding compliance evidence	Training Provider Confirm	HLC Confirm
Personal details – checked against ID and match, and learner meets the age criteria and DfE residency criteria	<input type="checkbox"/>	<input type="checkbox"/>
Direct payment to learner: 1. copy of bank statement or card taken 2. details on evidence match the application	<input type="checkbox"/>	<input type="checkbox"/>
Arrangement for funds to go training provider, explanation why: 1. Reason from learner why can't be paid directly 2. Your arrangements for that person to receive support	<input type="checkbox"/>	<input type="checkbox"/>
Vulnerable fund: 1. Evidence received from learner/parent/guardian or LA 2. Evidence matches the application	<input type="checkbox"/>	<input type="checkbox"/>
Discretionary fund:	<input type="checkbox"/>	<input type="checkbox"/>

1. Evidence received from learner/parent/guardian or LA for <b>all</b> categories		
2. Evidence matches the application		
3. Total income doesn't exceed £25,800 a year		
Total support on application is accurate for their planned provision and financial needs (subject to in-year provision changes)	<input type="checkbox"/>	<input type="checkbox"/>
Free Meals:		
Threshold 1 - UC earnings do not exceed £1,233.34 – 1 most recent UC award statement	<input type="checkbox"/>	<input type="checkbox"/>
Threshold 2 - UC earnings exceed £1,233.34 - 2 most recent UC award statements	<input type="checkbox"/>	<input type="checkbox"/>
Threshold 3 - UC earnings exceed £1,850.00 – 3 most recent UC award statements	<input type="checkbox"/>	<input type="checkbox"/>
Threshold 4 – Self-employment, UC award letter, company registration proof or tax return form and Thresholds 1, 2 or 3.	<input type="checkbox"/>	<input type="checkbox"/>
Application signed and dated by learner and parents/guardians	<input type="checkbox"/>	<input type="checkbox"/>

### Training Provider Declaration

1. I declare that the statements made on this form are true and to the best of my knowledge and belief are correct in every respect. I undertake to supply any additional information that may be required to verify the particulars given. I also undertake to inform HLC of any alteration to any of the particulars in writing.
2. I agree that we'll repay HLC in full and immediately any sums advanced if the information we have given is shown to be false or deliberately misleading. We will return funds to HLC if we have incorrectly claimed or if the learner does not start the agreed provision.
3. I understand that HLC will not back-pay for delays in submitting or correcting applications and missing or incorrect evidence
4. I confirm that I have read and understood the content of the Bursary Policy, '16-19 Bursary Policy 25-26 v1.0 - Delivery Partner' and agree to comply with requirements set out by HLC. Please visit our website for details:

### Company Name

<input type="checkbox"/>	<b>Goodwin Development Trust</b>
<input type="checkbox"/>	<b>Niche Education and Training Ltd</b>
<input type="checkbox"/>	<b>Unity in Community</b> (Northern Hull Community Development Limited)

Staff Name (PRINT):

Staff Signature:

Date:

### HLC Approval\*

Reason for delay in processing or rejection:

Staff Name (PRINT):

Staff Signature:

Date:

*\*Full checklist in the learner's CRM folder*