



# All Hallows Catholic College

A Voluntary Academy

*Aspire not to have more but to be more*

Brooklands Avenue, Macclesfield, Cheshire SK11 8LB | Telephone: 01625 426138 | admin@allhallows.org.uk | www.allhallows.org.uk

Principal - Mr T Beesley

## APPLICATION TO 16-19 BURSARY FUND 2023/24

### Financial Assessment Form

**Form to be returned to the Finance Office with supporting information by 29<sup>th</sup> September 2023**

(to be read in conjunction with relevant pages of the Sixth Form Handbook)

#### Student Details

Surname/Family name	
First name (s)	
Sex (M/F)	
Date of Birth (dd/mm/yyyy)	
Age on 31 <sup>st</sup> August 20223	

#### Address Details

Home Address	
Postcode	
Home telephone number	
Mobile telephone number	
E-mail address	
Have you lived in the UK for more than 3 years?	YES/NO

#### Student's Bank or Building Society account details

This should be the name as it appears on our cash or debit card or statement and should be the student's account not the parents'.

Full Name of Account Holder	
Name of Bank/Building Society	
Branch	
Sort Code	
Account Number	

#### Course Details

SUBJECT	LEVEL eg A2/BTEC/L2



Honourable Purpose

Respect

Compassion

Co-operation

Stewardship



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## Information to support your application

<b>ELIGIBILITY</b>		<b>EVIDENCE REQUIRED</b>
<b>PRIORITY 1 STUDENTS</b>		
Are you In Care / a Care Leaver?	YES/NO	Letter or email from your local authority
Do YOU receive Universal Credit (UC), Disability Allowance (DLA) or Personal Independence Payments (PIP) in your name?	YES/NO	Entitlement / Award letter – 3 most recent monthly award statements
<b>DISCRETIONARY STUDENTS</b>		
Were you eligible for Free School Meals at 31 <sup>st</sup> August 2023?	YES/NO	Letter/student record held in school.
<b>DISCRETIONARY STUDENTS</b>		
Is your household income under £26,000?	YES/NO	Working Tax Credit Award Notice marked 2022-23. Must be full year and not partial award. Universal Credit Award – 3 most recent monthly award statements.

## Declaration

Please read the declaration below and read carefully before signing:

1. I certify that the information in this application is true and accurate.
2. I understand that it is my responsibility to supply any additional information that may be required to verify the particulars given.
3. I will inform the college of any change of circumstances.
4. I agree to repay the college in full and immediately any sums advanced to me if the information I have given is shown to be false or deliberately misleading.
5. I understand that any payments are conditional upon meeting my school's expectations of attendance/behaviour/progress.
6. I am aware that the funding covers only this school 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.

Signed (Student) ..... Date .....

Signed (Parent/Carer) ..... Date .....



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