



APPLICATION FOR SIXTH FORM FINANCIAL SUPPORT

STUDENT DETAILS

First name(s)	
Surname	
Date of Birth	
Age on 31.08.18	
Home Address (including Post Code)	
Email Address	
Mobile No.	
Bank details	Account No. Sort Code: - - Account Holder Name: Name of Bank:
Please tick the appropriate box if any of the following circumstances apply to you: <ul style="list-style-type: none"> - you are 16 – 18, live independently and claim Income Support <input type="checkbox"/> - you are looked after by the Local Authority <input type="checkbox"/> - you are a Care Leaver <input type="checkbox"/> - you receive Disability Living Allowance and Employment Support Allowance <input type="checkbox"/> 	

PARENTS' OR CARERS' DETAILS

Surname	
Title and first name	
Address (if different from page 1)	
Contact telephone number and email address	

INCOME DETAILS

Please indicate which of the following benefits/income you are currently in receipt of. Please send evidence of household income. Original documents are required. These will be copied and returned to you.		
Type of income	Yes/No	Evidence required
Income support		An award letter which is no less than 3 months old on the date of application
Jobseeker's Allowance		An award letter which is no less than 3 months old on the date of application
Working Tax credit		All pages of your most recent Tax Credit Award
Income based Employment and Support Allowance (ESA)		An award letter which is no less than 3 months old on the date of application
Other: Benefits/Pensions (specify)		An award letter which is no less than 3 months old on the date of application
Earned income with no additional benefits		Include last 3 monthly wage slips or last 6 weekly wage slips or 4 fortnightly wage slips
Self-employed earnings with no additional benefits		Audited accounts or official tax return

Please note: you can attach a letter outlining any special circumstances that may apply in your case.

SUPPORT REQUESTED

<p>Transport</p> <p><i>To be eligible for support with transport costs, you must live outside the official Prospect School catchment area.</i></p>	<p>Applying for support with cost of transport?</p> <p>YES NO</p> <p>Please outline your specific transport requirements:</p>
<p>Clothing</p>	<p>Applying for support with cost of clothing <u>*appropriate for school wear?</u></p> <p>YES NO</p> <p>*Please identify specific item(s) listed which you need the school to help you to purchase:</p>
<p>Specific learning resources</p>	<p>Applying for support with cost of specific learning resources?</p> <p>YES NO</p> <p>Please list specific learning resource(s) which you need the school to help you to purchase:</p>

DECLARATION

<p>I certify that the information given above is correct and I understand that the school has the right to reclaim any funds and equipment costs if I am found to have provided incorrect information or do not complete my course.</p>	
Signature:	Date:
Signature of Parent/Carer:	Date:

This form, with supporting evidence, must be returned to Mrs Jeffery (Sixth Form P.A.) by **Tuesday 25th September 2018.**

Please note: Funding cannot be guaranteed in cases of over demand.