

ST FRANCIS XAVIER SIXTH FORM COLLEGE

APPLICATION FORM FOR BURSARY/FREE COLLEGE MEALS - 2020-2021

Only **fully** completed applications will be processed
Back pay will be paid **only** if completed applications and required documentary evidence
are received six weeks after your start date

STUDENT/PARENT/GUARDIAN/KEYWORKER /CONSENT

By signing this I give my consent to SFX to share the information on this form and any documentary evidence I include with the application with Wandsworth Eligibility Checking Service and, thereby, any government database it may use:

Adult 1 Signature: _____

Date: _____

Adult 2 Signature: _____

Date: _____

Student Signature: _____

Date: _____

SECTION 1 STUDENT'S DETAILS

STUDENT NUMBER: 300 _____

TUTOR GROUP: _____

SURNAME: _____

FORENAME: _____

Please tick: MALE ☐ FEMALE ☐

DATE OF BIRTH:

D	D	M	M	Y	Y	Y	Y

Home Address: _____

Age on 1st Sep. 2020 _____

Year 1 ☐ Year 2 ☐ Year 3 ☐

Postcode: _____

Home Tel: _____

Borough of Residence: _____

Mobile: _____

Email: _____

How will you get to College: BUS ☐ TUBE ☐ TRAIN ☐ OTHER ☐ Please state how: _____

Which London Transport Student Oyster Card do you have: 16+ ☐ 18+ ☐ Other ☐ None ☐

From which station and Transport for London Zone will you be travelling from: _____

SECTION 2 PARENT/GUARDIAN/CARER/ KEY WORKER DETAILS *(to be completed by your parent/guardian/carer/key worker)*

The information below must be accurate and legible, otherwise your application will be rejected by the Government database.

ADULT 1 Mr ☐ Mrs ☐ Ms ☐ Miss ☐ and

ADULT 2 Mr ☐ Mrs ☐ Ms ☐ Miss ☐

Full Name: _____

Full Name: _____

Date of Birth:

D	D	M	M	Y	Y	Y	Y

Date of Birth:

D	D	M	M	Y	Y	Y	Y

Home Address: _____

Home Address: _____

Postcode: _____

Postcode: _____

Home Tel/Mobile: _____

Home Tel/Mobile: _____

Email: _____

Email: _____

Relationship to student: _____

Relationship to student: _____

National Insurance or
NASS Reference Number:

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National Insurance or
NASS Reference Number:

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For SFX use only

Date received at SFX:

Please turn over

SECTION 3 DOCUMENTARY EVIDENCE FOR INCOME (please tick)

Parents/ Guardians must provide all of the following documents below **which apply**, to evidence household income.

☐ Letter from secondary school showing student has been in receipt of Free School Meals at any time since March 2018

Or

☐ All pages of original Final Tax Credit Awards Notice for tax year 2019—2020 or 3 most recent Universal Credit statements

If your application is rejected by the DWP we will require further evidence as listed below:

☐ Proof of income P60 (for tax year 2019-2020)

☐ Proof of Income P45 (if left job)

☐ Proof of income from Self Employment as confirmed

☐ Income Support

by the Inland Revenue (for tax year 2018-2019, SA302 or P800T)

☐ Jobseeker's Allowance

☐ Employment and Support Allowance

☐ Pension Credit

☐ Any other source of income, e.g. property, income from overseas

Please scan your completed application form and all documentary evidence and send them to: bursary@sfx.ac.uk

We may ask for further evidence, depending on individual circumstances.

PARENT/GUARDIAN/STUDENT DECLARATION

It is a serious offence to give false information. We have a duty to protect the public funds we control. We may use the information you have provided on this form to prevent and detect fraud. We will also share this information with other organisations which control public funds.

I declare that the information I have given here is true and complete, and I agree that I will inform the College of any changes to my financial circumstances. I also understand that failure to do so may result in my repaying the full cost of meals/bursary payments from the date of the change.

I agree that the information I have provided on this form will be submitted to the Department for Work & Pensions (DWP) to process my claim for free College meals/bursary. I agree that you will also contact other sources as allowed by law to verify my initial, and ongoing, entitlement.

I understand that the results of any free College meal eligibility check will also be used to assess my entitlement to a bursary.

Any false information given to the College will lead to my immediate exclusion (which may be permanent) and an obligation to repay any funds received fraudulently.

Please tick box to say you agree: Yes ☐ No ☐

I confirm that the information given on this form is true and correct.

Adult 1 Signature: _____

Date: _____

Adult 2 Signature: _____

Date: _____

Student Signature: _____

Date: _____

If your circumstances change during the year you must inform the Bursary Department at SFX in writing.

Data Privacy Notice:

In order to operate and to fulfil our legal obligation, SFX, (the Data Controller), needs to collect and use certain types of information about people, the data subject, with whom it deals. This personal information will be dealt with properly however it is collected, recorded and used. All information containing personal data is protected against unauthorised access, accidental loss or destruction, and unintended modification to disclosure. SFX fully complies with the principles of the General Data Protection Regulation (GDPR). By completing and submitting this form you consent to SFX holding your information for the purpose stated in the Privacy Notice for Students available on the College website. For more information regarding data protection please contact the DPO at dpo@sfx.ac.uk

The information being collected may be used for the prevention and detection of fraud and crime and we may, under the Regulation, not require your consent to do so. We may also share or be required to share relevant information with other public sector bodies and government agencies, such as the ESFA, the Department for Work and Pensions and HM Revenue and Customs.

Submit your completed application form with all supporting documentary evidence to bursary@sfx.ac.uk