



# Conyers School

*Perseverando*

*Through perseverance*

16 – 19 Bursary Fund 2019-2020

The 1590 Trust incorporating Conyers School & Sixth Form, Bader, Kirklevington, Layfield and Levendale Primary Schools

## Post-16 Discretionary Bursary Student Contract 2019-2020

Terms and Conditions

**Name:** \_\_\_\_\_

**Contact email address:** \_\_\_\_\_

I have read and understood the conditions that apply to the Post-16 Discretionary Support as outlined in my **application**. I confirm that I am not claiming any other government funding such as Adult Learning Grant, Dance & Drama Award, Jobseekers Allowance and/or NHS Bursaries and I also confirm that I meet the criteria in terms of my residency and that Conyers may at their discretion request evidence of such residency.

I agree to the terms of this contract and I have signed such agreement (see overleaf). In addition, I understand that by signing this **contract** with my Learning Provider (Conyers School) that I understand the attendance requirements. Such requirements are as follows:

### Attendance

To receive my weekly payment, I must attend **all registrations, mentor session, lessons and fortnightly assembly** in accordance with my individual timetable. I must arrive **on time** and work during lessons, meeting all deadlines set out in the school calendar. In return, my tutor and subject teachers will mark my attendance on the school electronic monitoring system. Providing that all lessons have been attended, Conyers will update the Post-16 Discretionary Support payment with a 'Yes' decision.

### Absence from tutorial and/or lessons

If I am absent from registrations, tutorials, lessons or weekly assembly, such absence will be seen as unauthorised and that will result in a 'No' payment decision being given for that particular week. In some cases, absences can be authorised and I understand that I must seek such authorisation in advance from the Sixth Form Office or subject teacher. Each request for an authorised absence will be considered on an individual basis and documentary evidence may be requested to support such authorised absence. All payments will be recorded as a 'No' decision until such evidence has been provided.

**See overleaf;**

**Sickness / Illness**

***On a general note, absence due to Holiday will not be authorised for payment. In the case of absence due to sickness/illness, my parent/guardian will notify the Sixth Form Year Manager on the first day of my absence before 9.30 a.m. and further provide a letter from home confirming such absence and hand this letter to the Sixth Form Year Manager on the day of my return.***

***Sixth Form Discretionary Bursary will not be paid in the case of consistent illness unless authorised by a medical authority.***

***We will only allow four periods of illness in a full academic year before payment is withdrawn. After this, payments will only be made on a full attendance basis.***

**Part-time work**

Under the Child Benefit regulations, a student must not exceed 24 hours of work per week [both in and out of school] before being classed as independent. Post-16 Discretionary Support, and any benefits received by the family may be affected if this is exceeded.

Signature of Student: \_\_\_\_\_

Date: \_\_\_\_\_

Signature of Parent: \_\_\_\_\_

Date: \_\_\_\_\_

Signature of Year Manager: \_\_\_\_\_

Date: \_\_\_\_\_

Signature of Director: \_\_\_\_\_

Date: \_\_\_\_\_

**APPLICATION FOR FINANCIAL ASSISTANCE 16-19  
BURSARY FUND AT CONYERS SCHOOL 2019-2020**

Please complete in **BLOCK CAPITALS** attaching evidence where requested. If you have any queries please contact **Conyers** on 01642 783253.

**PARTS A, B AND C TO BE COMPLETED BY STUDENT – please complete every question**

<b>PART A – Your Personal Details</b>	
First Name:	
Surname/Family Name:	
Date of Birth:	
House/Flat No:	
Street/Road:	
Town/City:	
Postcode:	
Email Address:	
Mobile Number – this will be used to inform you (via SMS) of a payment decision made on your Bursary:	
Are you the main carer for another adult or child under the age of 18?:	
How many other dependent children are in your household (excluding you)?:	

<b>PART B – Your Residency Status</b>		
	<b>YES</b>	<b>NO</b>
Are you a British Citizen? If answer is YES please then go to Part C.		
Are you a National of a Country in the EEA? (European Economic Area, this covers the 28 EU states, Norway, Iceland and Liechtenstein)		
Have you been resident in the EEA for 3 years prior to the start of the course?		
What is your immigration status in the UK? (please mark one box only)		
I am an asylum seeker* <input type="checkbox"/> I have refugee status* <input type="checkbox"/> have indefinite leave to remain/enter* <input type="checkbox"/>		
None of the above <input type="checkbox"/> *Please provide copies of your Home Office documents		

<b>PART C – Your Personal Circumstances</b>
Are <b>YOU</b> a Young Person in Care
Are <b>YOU</b> in receipt of Income Support or Universal Credit in your <b>OWN</b> right? (If <b>YES</b> please provide an Award letter dated in the last 3 months of application or a recent addressed bank statement)
Are <b>YOU</b> disabled and in receipt of Employment Support Allowance/Personal Independence Payment <b>AND</b> Disability Living allowance in your <b>OWN</b> right? (If <b>YES</b> please provide most recent Award Notice/letter or recent bank statement)

**If you have answered YES to any questions in PART C go to PART E. If you have answered NO to ALL questions in PART C go to PART D**



**PART F – Student Signature – to be signed by Parent/Guardian if student under 18 years**

**Please read and sign the following declaration.**

**We will not process this application without your signatures.**

- I/we certify that the information in this application is true and accurate.
- It is our/my responsibility to inform the school if circumstances change or I withdraw from the course and I understand that I/we may be required to pay some or all of the money awarded.
- I/we understand that any financial assistance given (**to the student**) is subject to satisfactory attendance/behaviour and may be withdrawn at any time and that I/we may be liable to repay any payments made.
- I/we understand that if the student leaves school or has any unauthorised absences all funding may stop.
- I/we understand that if I/we give false information or do not give all relevant information requested, funding will be withdrawn and I/we may be liable to repay any payments made.
- I/we are aware that the college will record and hold securely any information of a personal or sensitive nature, as per the General Data Protection Regulations 2019.
- I/we understand that permission will be sought before this information is passed to others in school and I/we understand that this will be done on a need to know basis only.

Signature of Student  Date

Print Name

Signature of Parent(s)/Guardian(s) (if student is under 18yrs)

Print Name of Parent(s)/Guardian(s) (if student is under 18yrs)

**IMPORTANT Please ensure that this form is completed fully and all documentary evidence is enclosed. The form can be submitted at any time but payments will not be released until you have enrolled and are attending classes.**

<b>Have you remembered to enclose:</b>	<b>Tick</b>
Evidence of <b>Student Bank Details</b> - Payments can only be made directly to the student	<input type="checkbox"/>
Evidence of Student Income Support/ESA or Universal Credit and DLA/Personal Independence Payment	<input type="checkbox"/>
Evidence from the local authority to confirm your care status (if you are in care)	<input type="checkbox"/>
The HMRC Tax credit award letter 2019-2020 from Parent(s)/Guardian(s)	<input type="checkbox"/>
Other evidence of relevant benefits or proof of household income as required	<input type="checkbox"/>

Please check that you answered each section fully and that you have signed the form.  
Once completed please return (with all evidence) to Finance Department, Conyers School, Green Lane, Yarm, Stockton-on-Tees, TS15 9ET.

**Any application forms received without the relevant evidence will be returned without consideration.**

# For office use only

EVIDENCE CHECK			
Student Number			
Application Received - Date			
Application Processed- Date			
Student's Bank Evidence – attached	YES	NO	
Student in receipt of Income Support, ESA, <b>OR</b> Universal Credit & DLA/Personal Independence Payments	IS/Univ Credit	ESA & DLA/PIP	
Parent(s)/Guardian(s) proof of Child Benefit – attached	YES	NO	
Address Confirmed as the same	YES	NO	
Parent(s)/Guardian(s) proof of Benefit/Income – attached	YES	NO	NA
Means Tested Benefit Claimed (if applicable) Initials e.g. IS/ESA etc.			
Total Amount Received from Benefits	£		
Type of Benefit Claimed e.g. Working Tax Credit, Child Tax Credit			
Total Household Income from Employment	£		
Missing Documentation Letter Sent – Date			
Additional information/documentation received & processed – Date			
Award Notification Letter Sent – Date			
Payment Amount Awarded	£	Date	
Authorised By:		Date:	
JMC Authorised:		Date:	
<b>NOTES:</b>			

*Chief Executive of The 1590 Trust & Headteacher of Conyers School: Louise Spellman*

*The 1590 Trust, Green Lane, Yarm, Stockton-On-Tees, TS15 9ET*

The 1590 Trust is a company limited by guarantee (company No. 08366005) and exempt charity registered in England and Wales at Green Lane, Yarm, Stockton-On-Tees, TS15 9ET VAT No. 155752886