

Identification of support needed

Please complete this form in as much detail as possible and hand to Mrs Plimbley. You will receive a decision within a maximum of ten working days. Please be assured that all applications to discretionary bursary are dealt with confidentially.

Full name		DOB		I confirm that my financial status has not changed since my bursary application (please tick)	
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Identified need	Full Details – please be as accurate as possible	Amount claimed		?	Office use
Reading material <i>(eg. Text books, revision guides etc)</i>					
Equipment <i>(eg. ICT equipment, stationary etc)</i>					
Travel costs <i>(Bus, train, petrol etc)</i>					
Open days / visits <i>(University open days, study days, school visits etc)</i>					
Specialist clothing <i>(Work placement, interview)</i>					
Other					

Please continue overleaf

Any further supporting information relating to this claim

Total claim amount	£	Signature		Date	
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FOR OFFICE USE ONLY

Date received		Date response required by		Signature (L Plimbley)	
Attendance (Year to date received)					
Lesson marks (Year to date received)					

Awarded – please tick appropriate box (✓) and add notes where appropriate