



**EAST
SUSSEX
COLLEGE**

Date Received: Office Use Only

Student ID

Childcare

ALL

Adult Bursary Application 2019/2020

***This application covers: Advanced Learner Loan, Adult Education and Childcare Bursaries.
It does not cover Higher Education Courses such as Foundation & Top Up Degrees or HNCs/HNDs***

Applications must be received prior to the end of your course.
Students on two year programmes will need to reapply in their second year and awards may be different.
Students on short courses will need to reapply for each subsequent course.
Funds are limited and the fund will close when fully allocated.

Please note that completing this application form **does not guarantee** funding.
Awards are made at the **discretion** of East Sussex College Group

Section 1: Your Personal Details

First name

Surname

Title (Mr/Mrs/Miss/Other)

Date of birth / /

Age on 31st August 2019

Permanent Home Address

Home Telephone Number

Mobile Telephone Number

Email

Have you claimed, or are you currently claiming, asylum in this country?

YES

NO

If yes, please provide Home Office documentation

Section 2: Your Learning Programme

Course Title (incl level)

College Campus

Eastbourne

Hastings

Lewes

ATC

Newhaven

Ore Valley

Section 3: Compulsory & Financial Information

Please answer **ALL** questions and provide **ALL** the evidence requested.
Your application will be returned to you if any evidence is missing.

Do you live with a partner/parent (s) YES NO

(A partner is defined as someone you are married to/have a civil partnership with, or live as though you are married to/have a civil partnership with them/ If a parent (s) IS financially responsible for the household you live in, please provide details of their financial situation).

**Funding will be awarded if you have a sole income of £20,000* or less
or your household income is £31,000* or less**

***Earned Income and Income related benefit payments**

Do you or your parent(s)/ guardian(s)/ partner receive any of the following benefits? Please tick:

Income Support	<input type="checkbox"/>	Job Seekers Allowance	<input type="checkbox"/>
Employment & Support Allowance	<input type="checkbox"/>	Tax Credit Award notice	<input type="checkbox"/>
Universal Credit	<input type="checkbox"/>	Personal Independence Payments	<input type="checkbox"/>

If you have ticked any of the above, you must provide a copy of the full award letter (this must be less than 3 months old) with the exception of Tax Credit awards, which must be for the current tax year 2019/2020

***It is your responsibility to declare any funding received through the bursary in conjunction with your benefit claim.**

Section 4: Employment Information

Please tick the relevant box to tell us about **your** employment status

Employed	Self employed	State Pension	Not Employed
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please tell us your **partner's/parent's** employment status (if applicable)

Employed	Self employed	State Pension	Not Employed
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- *If you or your partner/ parents are employed, you must submit the last 3 month's payslips with your application.*
- *If you or your partner/ parents are self employed, please provide a **letter from your accountant**.*
- *If you or your partner /parents receive a private pension, please provide information from the scheme administrator outlining the gross pension per year.*

Section 5: Applying for Course Costs

Please tick which of the following costs you are applying for:

Tuition/ Exam Fees	Course Books	Other materials
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Art Materials	Kit/Equipment/Uniform	Trips
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Section 6: Travel

Please complete below if applicable

If you live over 3 miles from your college campus, you may be eligible for a contribution towards your travel costs.
 If you travel by car/ moped you will receive 12p a mile or part of, this is in line with the 2019 HMRC Guidelines

Mileage will be calculated using Google maps, using shortest walking distance from home postcode to campus postcode.
 Bus & Train travel will be calculated at the lowest cost, weekly or per day, based on your timetable

We expect you to use the most cost effective form of transport and take advantage of student concessions and discounts including the Mega Rider, Brighton Unizone train ticket where available etc.

Please tick your method of travel

*Train Bus Car/ Motor vehicle

***Departing Train station**

Google Maps Route planner Mileage Check
 Calculations:

Office Use Only

 miles

Section 7: Your Payment Details

Please provide *your Bank or Building Society details below
 *The Bursary can only be paid to an account in the name of the student
PLEASE CHECK YOUR ACCOUNT ACCEPTS PAYMENTS BY BACS

Name of Bank/Building Society

Sort code
 6 digits only

Name of Account Holder

Account Number
 8-9 digits

Building Society roll/Reference
 (if applicable)

Calculations/Notes:

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		%-	
Equipment/Kit/Uniform:	£		
Books/Materials:	£		
Trips	£		
Tuition/ Exam Fees:	£		
Travel	£		

Total:

Assessor Initials/Date

Section 8: Childcare
(If not applicable go to section 10)

Students aged 19 must apply to the Care to learn scheme

For further information about Care to learn please see website or call your college campus

www.gov.uk/care-to-learn

Childcare Bursary
2019/2020

Students aged 20+ on 31.08.19

Do you have main parental responsibility for the child/children requiring childcare support?

YES

Please go to Section 10

NO

Please go to Question 9a

Question 9a: If you do not have main parental responsibility, please give details below

Section 10: Supporting Information

*Please provide any information below in support of your childcare application, your
Childcare Provider may also include further information, including notice of any future price
increases or closure days*

Office Use Only

20+ Childcare

Advanced Learner Loan

Section 9: Childcare Support Costs 2019/2020

 20+

 ALL

*To be completed with Childcare Setting
Child 1/Setting1*

Student Name	<input type="text"/>	Student ID	<input type="text"/>
Child Name	<input type="text"/>	Child DOB	<input type="text" value="D"/> <input type="text" value="D"/> / <input type="text" value="M"/> <input type="text" value="M"/> / <input type="text" value="Y"/> <input type="text" value="Y"/>

Childcare Provider to complete this section

Day	Start time	Finish time	Hour Rate	Session Rate	Day Rate
Monday					
Tuesday					
Wednesday					
Thursday					
Friday					

Start date for funding :

Total for week : £

Please tick which Retainer Weeks are to be paid

<input type="checkbox"/> Autumn half term	<input type="checkbox"/> May half term	<input type="checkbox"/> Easter Break
<input type="checkbox"/> February half term	<input type="checkbox"/> Christmas Break	<input type="checkbox"/> Bank Holidays

Please provide information regarding rates/charges

Full day rate £ Hourly rate £ AM Session rate £ PM Session rate £

Childcare Provider Payment Details

Name of Childcare Provider <input style="width: 90%;" type="text"/>	
Address of Childcare Provider <input style="width: 95%;" type="text"/>	Contact Name <input style="width: 80%;" type="text"/>
	Contact Number <input style="width: 80%;" type="text"/>
Ofsted Registration Number <input style="width: 70%;" type="text"/>	Contact Email <input style="width: 80%;" type="text"/>
Name of Account Holder <input style="width: 95%;" type="text"/>	
Bank/Building Society <input style="width: 95%;" type="text"/>	
Sort Code <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>	Account Number <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>
Building Society Roll/Ref Number <input style="width: 95%;" type="text"/>	

I confirm the information supplied is accurate and up to date, and any changes to this will be notified in writing.

Signature of Provider	Date
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If you are a childminder, you must enclose a copy of your childminding registration certificate and Public Liability Insurance; without this we can not assess the application.

Section 9: Childcare Support Costs 2019/2020

 20+

 ALL

*To be completed with Childcare Setting
Child 2/Setting1*

Student Name	<input style="width: 95%;" type="text"/>	Student ID	<input style="width: 95%;" type="text"/>
Child Name	<input style="width: 95%;" type="text"/>	Child DOB	<input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> / <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> / <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/>

Childcare Provider to complete this section

Day	Start time	Finish time	Hour Rate	Session Rate	Day Rate
Monday					
Tuesday					
Wednesday					
Thursday					
Friday					

Start date for funding :	Total for week : £
Please tick which Retainer Weeks are to be paid	
<input type="checkbox"/> Autumn half term	<input type="checkbox"/> May half term
<input type="checkbox"/> February half term	<input type="checkbox"/> Christmas Break
	<input type="checkbox"/> Easter Break
	<input type="checkbox"/> Bank Holidays

Please provide information regarding rates/charges

Full day rate £ Hourly rate £ AM Session rate £ PM Session rate £

Childcare Provider Payment Details

Name of Childcare Provider	<input style="width: 95%;" type="text"/>
Address of Childcare Provider	Contact Name <input style="width: 95%;" type="text"/>
<input style="width: 95%; height: 40px;" type="text"/>	Contact Number <input style="width: 95%;" type="text"/>
Ofsted Registration Number <input style="width: 95%;" type="text"/>	Contact Email <input style="width: 95%;" type="text"/>
Name of Account Holder	<input style="width: 95%;" type="text"/>
Bank/Building Society	<input style="width: 95%;" type="text"/>
Sort Code <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/>	Account Number <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/>
Building Society Roll/Ref Number	<input style="width: 95%;" type="text"/>

I confirm the information supplied is accurate and up to date, and any changes to this will be notified in writing.

Signature of Provider	Date
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If you are a childminder, you must enclose a copy of your childminding registration certificate and Public Liability Insurance; without this we can not assess the application.

Section 10: Additional Supporting Information

To explain why you need help with course costs

Section 11: Declaration - Please read carefully before signing

- I declare that the information provided is true and accurate and that I am agreeing to all conditions and eligibility of the scheme. I am able to provide all the evidence requested to support my application. I understand that if I do not provide all evidence requested, my application form will be returned. I understand that if I have given false information which results in incorrect or overpayment, future payments will be stopped and I will be asked to repay any funds already paid. The matter may also be referred to the police.
- I understand that it is my responsibility to inform the College of any change to my circumstances, personal/family or financial.
- I understand that eligibility does not mean an award will be made. That there is no guarantee that funds will be available when I apply and that if there is a high demand on the funds, awards may be given at a reduced rate. The fund(s) will close when fully allocated.
- I have not applied to any other organisation, e.g. a charitable trust, for any assistance that I am requesting from the discretionary fund.
- If awarded, I understand that any payments will not commence until I am enrolled and my attendance is confirmed. Payments will be made at the discretion and at a date to be confirmed by East Sussex College Group. My application may take up to 8 weeks from the beginning of term to process.
- If applying for the Bursary funded by the Advanced Learner Loan I understand that until my loan application is at 'Approved' Status, the application will not be assessed.
- I understand that my attendance will be monitored monthly, if my attendance falls below 90% or my progress and/or behaviour is below satisfactory standard, I may have my payment refused. An unauthorised absence is subject to a referral process. Any payment refused will be communicated to me via a letter/ email. Attendance below 90% may also lead to childcare funding being suspended or stopped, and I may be responsible for any outstanding costs myself.
- If I withdraw from College, I am responsible for any childcare fees incurred after my last date of attendance/ date of withdrawal whichever is earliest including any notice period.
- I understand that if I leave my course early, the college will request that I return any money, uniform, or kit that has been purchased with discretionary funds.
- I understand that childcare will be paid in arrears direct to the provider. If payments are made by myself in advance, proof of payment will be required to reimburse me directly. The College will inform the childcare provider if childcare funding has been awarded and may from time to time contact them regarding payments.
- I understand it is my responsibility to tell the department for work and pensions about any learner support I am receiving, as learner support payments may effect my eligibility to state benefits
- I understand that the information given on this form may be shared with other departments in the College and may also be shared with other bodies who administer public funds and in compliance with legal/ statutory obligations.

A copy of our Funding Policy & Procedures is available from the Student Finance Team. The College retains the right , unreservedly, to make changes or modifications to this policy without prior notice

Student signature

Date

Checklist

1. Have you completed all relevant sections of this application in full?
2. Have you enclosed all your evidence/documents?
3. Have you signed the declaration above?
4. Have you /your Childcare Setting completed all relevant sections of this application in full?

Please remember to provide good quality copies of your supporting evidence, not the original, as we are unable to return documents.

PLEASE RETURN THIS FORM TO YOUR USUAL CAMPUS BY HAND OR POST TO

Student Finance Team

*Eastbourne, Lewes,
Newhaven*

**Eastbourne Campus
Cross Levels Way
Eastbourne
East Sussex
BN21 2UF**

030 300 39699

*Hastings, Ore valley
& Automotive training*

**Station Plaza
Station Approach
Hastings
East Sussex
TN34 1BA**

01424 442222