

16-19 BURSARY FUND 2023 / 2024 Year 13 Continuation Claim

DECLARATION FORM

Student's Name:		
Parents / Carer:		-
Address:		-
Phone:		-
e-mail:		-
personal / household circu in October 2022. I understa Form Office of a change in and may result in further a	re to repay part or all on this assistance	ginal application made ailure to notify the Sixth squalification of suppor
I confirm that I am still in fi	nancial need.	
Signed:	(Si	tudent)
Signed:	(Pa	arent / Carer)
Date:		

Please return this form, including any supporting documentation you may wish to submit to:

Mrs Chapman – Barnwell Sixth Form.

Achieving Excellence Together

Telephone: 01438 222500 Fax: 01438 222501 Email:communication@barnwell.herts.sch.uk Website: www.barnwellschool.co.uk

Headteacher: Mr A. Fitzpatrick