

16–24 Apprentice in Care or Care Leaver Bursary Declaration 2022-23

Please note all attachments are at the end of the document

Learners First Name(s):		Family Name:	
Address Line 1:		Date of Birth:	
Address Line 2:		Age now:	
Town/City:		Contact Number:	
County:		Email Address:	
Postcode:			
Course			
Learning Start date			
<p>Are you 16-24 in Care or a Care Leaver defined as: (Please tick all relevant criteria below)?</p> <p>: an eligible child – I am young person who is 16 or 17 and who has been looked after by a UK local authority or health and social care trust for at least a period of 13 weeks since the age of 14 and who is still looked after</p> <p>: a relevant child – I am young person who is 16 or 17 who has left care within the UK after their 16th birthday and before leaving care was an eligible child for at least a period of 13 weeks since the age of 14</p> <p>: a former relevant child – I am a young person who is aged between 18 and 24 (up to your 25th birthday if they are in education or training) who, before turning 18, was either an eligible or a relevant child</p>	<input type="checkbox"/> <input type="checkbox"/>	<p>Which Local Authority were you in Care with?</p>	
	<input type="checkbox"/>	<p>Please give dates, or state period you were in Local Authority Care</p>	
	<input type="checkbox"/>	<p>Have you received a Care Leavers Bursary before?</p>	<p>Yes / No</p>
	<input type="checkbox"/>		



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I understand that if I am found to have accepted the Bursary payment incorrectly or are found to be ineligible the government will require it to be repaid. Agree

Applicant Signature:

Date:

Please attach evidence of eligibility as otherwise your request cannot be processed

OFFICE USE ONLY

Date received:

Eligible for payment *Yes / No*

Date payment made to learner:

Payment Confirmation

I confirm I have received my payment

Learner signature:

Date: