16-19 BURSARY CLAIM FORM

Name:	
Address	**Date:**
Post Code	**Tutor Group:**

I claim reimbursement for the sum of £ _____ for the expenses detailed below.

I have attached all receipts or proof of purchase relevant to my claim. I understand that payments may be withheld if they are not supported by appropriate receipts.

I confirm that these expenses are necessary for me to pursue my studies at Denefield.

Signed …….… Date…….

Details of expenses claimed	£	p

Total expenses claimed		

Approved payments will be made to the bank account on your bursary application form. If you have changed your bank account, please provide your new bank details here.

Changes to bank account:

Account name: [ ]

Account no: [ ] Sort Code: [ ]

Office use:

Received: [ ] FBD: [ ]

Paid by BACS: [ ] Date paid: [ ]

Please submit this form, together with receipts, to Mrs J Levey, Welfare Manager Sixth Form, or directly to the Finance Office finance@denefield.org.uk