

**Self-Declaration – Learner Support Funds**

Learner name			
Date of Birth		Age on <b>1<sup>st</sup> September 2024</b>	
Student No.		Course Title	

I confirm that my household financial income has not changed since academic year 23-24

I am in financial need of (Please tick the appropriate boxes):

- Travel Pass
- Travel - Mileage
- Course Fees
- Free Meals
- Kit / Uniform
- Childcare
- Trips
- Stationery
- Books
- Vulnerable Bursary

Is your course funded via an Advanced Learner Loan? Yes / No (Delete as appropriate)

Do you have an EHCP? Yes / No (Delete as appropriate)

Please be aware that giving false or incomplete information that leads to incorrect/overpayment may result in future payments being stopped and any incorrectly paid funds being recovered. This may result in a referral to the police with the possibility of the student and/or their family facing prosecution

By signing this document, I confirm I have read, understand and agree to the terms and conditions of this funding which is available online at <https://bacoll.ac.uk/funding>

If at any time you would like us to speak to someone on your behalf regarding your learner support funds application and entitlement, please confirm their name and relationship below.

Name: ..... Relationship: .....

Signed (Learner): .....

Date: .....

Received by: .....

Date: .....