

Social Work Bursary: Academic Year 2016/17

Confirmation of earnings

1. Student details

Your bursary reference number

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(Your bursary reference number begins with a '2' or '3'. Please leave blank if unknown.)

The names you use here need to match the names you give to your university/college when you register..

Surname or family name

Other names

2. Details of Parent, Spouse, Civil Partner or Partner

Title Mr Mrs Ms Miss Other

Surname or family name

First name

Other names

Date of birth

Payroll number

Hand this form to your employer. Once your employer has completed parts 3 and 4, post the form to Social Work Bursaries at the address on page 3.

3. Details of Earnings - to be completed by the employer

Employer's name

Employer's address

Employer's telephone number

Employer's email address

3. Details of Earnings (continued)

The amounts detailed below are from the financial year ending 5 April (Enter year)

	£	p
Gross pay - Include employee pension contributions, statutory sick pay and overtime		
Other taxable income or bonus		
Pay for previous employment		
Taxable benefits - car, fuel BUPA etc.		
Employee pension contributions paid		
National Insurance contributions		
Income Tax		
Tax Code		

4. Declaration

I declare that the information given on this form is complete and accurate.

I declare that I am authorised to provide the above details of earnings of the person named at section 2 of this form for the financial year ending 5 April (Enter year) on behalf of the employer named at section 3 of this form.

Signature (for employer)

Name

Position

Date

Company stamp (if applicable)

Posting this form to Social Work Bursaries

- Keep** a photocopy of all documents sent for your own records. The NHSBSA cannot take responsibility for applications and evidence lost in the post.
- Pay** the correct postage and write your name and address on the back of the envelope to avoid your mail going astray.
- Post** If you are sending your application by Special Delivery, make a note of your Special Delivery reference number.

Post this form by Special Delivery to guarantee it is delivered to:

Social Work Bursaries
PO Box 141
Hesketh House
200-220 Broadway
Fleetwood
FY7 9AS