**FINANCIAL ASSISTANCE APPLICATION FORM (April 2022)**

**Claimants Details**

Notes for Completion:

* The school aims to support families in genuine need with financial assistance to allow all students to access education at Southchurch High School equally.
* The school does not make cash payments to parents/carers but may, under certain circumstances, provide financial assistance with the purchase of uniform and other equipment as well as educational visit costs.
* Each application will be considered on its individual merits and all information available will be used to assess whether the school is able to provide financial assistance.
* This form must be completed in entirety. NO application will be considered without supporting evidence of need.
* Completed forms should be sent to the relevant Head of Year for initial processing.

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| **Please complete in CAPITAL LETTERS** | | | | | | | | | |
| **Title:** | | ***Miss, Ms, Mrs, Mr or Other*** | | | | | | | |
| **Surname or Family Name:** | |  | | | | | | | |
| **First Name:** | |  | | | | | | | |
| **Partner’s Surname:** (if applicable) | |  | | | | | | | |
| **Partner’s Forename:** (if applicable) | |  | | | | | | | |
| **Address:** | |  | | | | | | | |
| **Postcode:** | |  | | | | | | | |
| **Telephone:** | |  | | | | | | | |
| **Email address:** | |  | | | | | | | |
| **Children you wish to claim for:** | | | | | | | | | |
| **Name of child** | | **Tutor Group** | **Date of birth** | | | **Male/Female** | | | **Eligible for FSM** |
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| **Items you wish to apply for assistance for:** | | | | | | | | | |
| Extra curriculum trips, visits, year group residential - please give details: | | | | | | |  | | |
| Uniform, shoes or PE kit - please give details ***including sizes***:  ***Items of school uniform will be ordered from Crawlers Uniforms and must be collected by parents/carers.***  ***Shoes will be ordered by the school and issued directly to students*** | | | | | | |  | | |
| Other materials or equipment for academic studies - please give details: | | | | | | |  | | |
| **SCHOOL USE ONLY** | | | | | | | **Cost** | | **£** |
| **Home Financial Circumstances** | | | | | | | | | |
| What is the total monthly income in your main home? | | | | | | | **£** | | |
| Are you claiming any benefits or currently applying for any benefits? Please specify which ones and where you are in the application process: | | | | | | | **Yes / No** | | |
| Please explain your family financial circumstance, indicating why child should be considered for funding. Please provide as much detail as possible to enable us to carefully consider your application. | | | | | | | | | |
| **Documentation to Support the Application** | | | | | | | | | |
| To support this application, please tick which of the following documentation you will be using as evidence of your total household income. Please attach all documentation to this application form. | | | | | | | | | |
| £\_\_\_\_\_\_\_\_\_\_\_ Certified accounts (if self-employed)  £\_\_\_\_\_\_\_\_\_\_\_ Letter from the DWP awarding benefit  £\_\_\_\_\_\_\_\_\_\_\_ Letter from the DWP acknowledging processing of benefit application  £\_\_\_\_\_\_\_\_\_\_\_ P60  £\_\_\_\_\_\_\_\_\_\_\_ Payslips (if you are paid monthly include the most recent three months or, if  weekly, the most recent four weeks)  £\_\_\_\_\_\_\_\_\_\_\_ Pension  £\_\_\_\_\_\_\_\_\_\_\_ SA 302 Form  £\_\_\_\_\_\_\_\_\_\_\_ Universal/Tax Credit award notice  £\_\_\_\_\_\_\_\_\_\_\_ Other means tested benefit | | | | | | | | | |
| **Declaration** | | | | | | | | | |
| All of the information provided on this application form is accurate and no information has been withheld that would be relevant to my request for financial assistance. | | | | | | | | | |
| Signature of Parent/Carer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | |
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| **School Use Only** | | | | | | | | | |
| **Financial Assistance Decision** | | | | | | | | | |
| Decision regarding the application: **APPROVED/NOT APPROVED** | | | | | | | | | |
| Reasons for the decision being made: | | | | | | | | | |
| Signature of SLT PP Lead |  | | | Authorised by Headteacher | | | |  | |
| Date |  | | | Date | | | |  | |
|  | | | | | | | | | |
| Date Order Submitted to Crawlers (if applicable) | | | | |  | | | | |
| Finance Manager Signature | | | | |  | | | | |