**Pupil Premium Discretionary Fund: APPLICATION FORM**

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| **Part 1: Student Details** |
| Name: |  | Year:  | Form: |
| Address |  |
|  |
|  Post code: |
| **Part 2: Funding** | Academy Use Only |
| I wish to apply for assistance on the following items:* field trip/school journey
* books and/or equipment
* course related fees not paid by the school
* home to school transport costs
* higher education interview expenses
* other (please specify)

Further details:How will this benefit the progress of your child? | Amount of assistance requested(£) | Amount approved(£) |
| **TOTAL** |  |  |
| **PLEASE NOTE**: If successful, you will be asked to produce receipts or other evidence of expenditure at a later date. |

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| **Part 3. 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 Student: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_Signature of Parents/Carer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_Signature of Head Teacher: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_ |
| **Part 4: Payment Information** – Payments will be made via Bank Payment only |
| Name of Account Holder: |
| Name of Bank: |
| Bank Sort Code:  |
| Bank Account No: |
| Date Actioned by finance  |