**Application for School Clothing Grant**

The information provided will be treated as strictly confidential. Please complete the form in BLOCK CAPITALS and return to the school along with all requested documents. Failure to provide correct documents may delay your application.

Clothing Grants are only issued to students going to Year 7 or 9.

If you eligible please make your application for FSM (Free School Meal) before applying for School Clothing Grant

**ABOUT YOURSELF**

Full Name: Date of birth:

Telephone: Email:

Present Address:

Postcode:

Date moved to this address:

Previous address (only if moved in the last 2 years)

Relationship to child(ren) □ Mother

□ Father

□ Other (please specify)

National Insurance No: Are you a single parent? □ Yes □ No

Have you previously received a uniform grant? □ Yes □ No

If yes, date received Name of Paying Authority\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please tick which benefit, if any, you are receiving. Please provide letters of proof valid within the last three months.

□ Income Support - please provide a recent Job Centreplus letter stating that you receive this benefit.

□ Jobseeker's Allowance (Income-based) - please provide a recent Job Centre letter stating that you receive this benefit.

□ Child tax credit/working tax credit (provided your household income does not exceed £16,190)

□ An Income-Related Employment and Support Allowance, please provide proof.

□ Pension Tax Credit and have an annual taxable income, as assessed by the Inland Revenue, of less than £16.190 from 6 April 2015

□ The 'Guaranteed' element of State Pension Credit - please provide your Pension Credit M1000 Award Notice.

□ Financial support, in accordance with the Immigration and Asylum Act 1999, from the National Asylum Support Service (NASS) or the Council's Asylum and Resettlement Team - please provide a letter from NASS.

□ Universal credit, provided your household annual taxable income does not exceed £7,400

**ABOUT YOUR CHILDREN**

Please give details of children for whom this application is made and submit evidence of child benefit and a copy of the child’s birth certificate. You do not need to submit a birth certificate for a child you have previously applied for.

|  |  |  |  |
| --- | --- | --- | --- |
| **Surname (Last Name)** | **First Name(s)** | **Date of Birth** | **Name of Secondary School** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

Names of all other children (including adopted children) living at home, for whom you receive Child Benefit.

|  |  |  |  |
| --- | --- | --- | --- |
| **Surname (Last Name)** | **First Name(s)** | **Date of Birth** | **Name of Secondary School** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**Data Protection**

This school is under a duty to protect the public funds it administers and to this end may use the information you have provided on this form within this school for the prevention and detection of fraud. It may also share this information with other bodies administering public funds solely for these purposes.

The information supplied on this form will be stored securely by this school and is subject to the terms of the Data Protection Act 2018.

**Declaration**

To be signed by both parents (or guardians). If this is not possible (e.g. one parent family) the fact should be stated.

IF YOU DO NOT ATTACH ALL THE NECESSARY DOCUMENTS WE WILL NOT BE ABLE TO PROCESS YOUR APPLICATION AND IT WILL BE RETURNED TO YOU.

l/we hereby declare that the information on this form is correct.

l/we undertake to notify the school immediately if my/our benefit stops.

**Signed: (Mother/stepmother or Guardian) Date:**

**Signed:(Father/stepfather or Guardian) Date:**