

***Blue Coat CE Academy***

**STUDENT SUPPORT FUND APPLICATION FORM 2025-26**

**PROTECTION OF PUBLIC FUNDS**

We must protect the public funds we handle and we may use the information you have provided on this form to prevent and detect fraud. We may also share this information, for the same purposes, with other organisations that handle public funds, and with this in mind, a sample of applications will be chosen at random for full investigation.

**DATA PROTECTION**

The data controller is Blue Coat Church of England Academy. The data you provide will be used to assess and facilitate your entitlement to financial support from the Student Support Fund. The information given on this form will be subject to the provisions of GDPR 2018. Please refer to our website for our Privacy and Data Retention Policies.

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| **SECTION A: STUDENT DETAILS** |

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| **Name of parent/carer** | *Sixth form applicants can leave this section blank* |
| **Name of student** |  |
| **Year group** |  |
| **Home address** |  |
| **Contact telephone number** |  |
| **Parent email address** | *Sixth form applicants should enter their own email address* |

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| **SECTION B: ELIGIBILITY** |

Please tick as appropriate

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| i | My child is in receipt of free school meals. |  | We will check your child’s eligibility with the free school meals service. |
| ii | My child has been in receipt of free school meals at some time in the last six years. |  | We will check your child’s eligibility with the free school meals service. |
| iii | My child is a looked after child, i.e. in care. |  | Please provide a letter from the social worker. |
| iv | My child is living with a parent who is in the Armed Forces. |  | Please provide a letter from the Armed Forces. |
| v | If none of the above apply but you feel you have exceptional circumstances making you eligible to apply please briefly explain why below: |  | You will need to provide supporting evidence of your household financial position, e.g. benefit letters, tax credit award notice, P60, pay slips for the last three months, last three universal credit award notices, pension statements. |

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| **SECTION C: FINANCIAL SUPPORT REQUIRED** |

Please indicate below what you would like help with and whether you want payment in kind or want to be reimbursed (you will need to attach a receipt if you are claiming reimbursement).

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|  |  |  |  | *Tick as appropriate* | |
| *Tick* | **Item** | **Details** | **Cost** | **In-kind** | **Reimbursement** |
|  | Bus pass to and from school (one term only) | Eligibility will be reassessed on a termly basis. **PARENT/CARER MUST REAPPLY FOR EACH TERM.** |  |  |  |
|  | Books | Please give name of book(s) below: |  |  |  |
|  | Revision guides | Please give names of revision guide(s) below: |  |  |  |
|  | Equipment | Please give details below: |  |  |  |
|  | Trips | Please give name of trip below: |  |  |  |
|  | Uniform | Please list items below: |  |  |  |
|  | Other | Please give details below: |  |  |  |

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| **SECTION D: PARENT/CARER OR SIXTH FORM STUDENT DECLARATION** |

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| It is important that you read the following statement carefully. We will not consider the application unless it is  signed and dated:   * The information I have given on this form is accurate. * I will inform you immediately of any change in my personal circumstances as they occur. * I understand that if I provide false or incomplete information I will have to refund the Academy. * I have attached a receipt to this application (if claiming reimbursement). * I have enclosed **origina**l documents to confirm my household income (Section B v] above only) * I understand that you will contact me if further information is needed.   **Signature of Parent/Carer or Sixth Form Student: …………………………………….. Date: …………………….**  **Name in BLOCK LETTERS: ……………………………………………………………………………………………………**  *Please return completed application forms to Mrs D Deeming, School Business Manager (*[st-deeming-d@bluecoatacademy.org](mailto:st-deeming-d@bluecoatacademy.org) *or via Reception).* |