

## **GUILSBOROUGH ACADEMY**

# **Hardship Fund Policy and Application Form**

Policy Name	Hardship Fund Policy and Application Form
Committee	Standards & Curriculum
Owner	Principal and Business and Operations Director
Statutory	No
Authorisation	Principal to Ratify, S&C Trustees to note

Date Ratified	Review Date
June 2023	June 2024

#### Statement

The Hardship fund provides financial assistance for students Year 7 to 11 whose financial circumstances are exceptional and particularly those students who need financial help to meet extra costs that cannot be met from other sources of support. The fund can also help to alleviate unexpected financial hardship.

Students in Year 12 and 13 can apply for financial assistance to the 16-19 Bursary Fund.

### The Aim of the Fund is to help parents/carers who have difficulties in paying for items such as:

- Educational visits directly related to the curriculum
- Music tuition
- · Uniform, shoes or PE kit
- Other materials or equipment required for their academic studies
- Emergency travel expenses

### The Academy will consider requests for hardship funding from the following groups of students:

- students living alone outside the family home
- students in receipt of free school meals
- students in families with very low incomes
- students with disabilities
- students who are or have been in care

#### Your Child may be eligible for financial assistance from our hardship fund if:

- A household income of below £25,000
- A student whose parents/carers are currently claiming other means-tested benefits including Income Support, Working Tax Credit/Universal Credit, Child Tax Credit, Income Based Employment and Support Allowance (ESA), who is not entitled to free school meals
- At the discretion of the Principal, any student who does not fall under the categories listed above, but considers themselves to be in financial hardship.



#### Proof of Benefit is required. Proof must be in written form and:

- Proof of benefit must have been issued within the last six months
- Proof must show the family address given
- Proof must be included with the Application Form
- Bank Statements, incapacity, housing and council tax benefit are not valid proof.

#### Letters of Proof of Benefits can be obtained from:

- Inland Revenue Child Benefit Office 0300 200 3100
- Inland Revenue Tax Credits 0345 300 3900
- Jobcentre Plus 0800 055 6688
- Asylum Helpline 0808 801 0503

#### How to apply to the Hardship Fund

Parents/carers should apply directly to the Principal using the attached financial assistance application form and by enclosing the required documentary evidence in support of the claim. Applications will be reviewed and individually assessed by the Principal and School Trustees panel.

Payment will be made only in the following ways:

 All payments will be made through the Academy's internal financial system directly to the supplier by receipt of invoice for goods purchased.

A parent/carer may be able to apply for hardship support at any time during the academic year. It may also be possible to apply more than once, but usually only where circumstances have not changed.

### **Appeals**

In the exceptional circumstances of an appeal against a decision regarding a claim for financial support, this would follow the Academy's Complaints Policy and procedures.



## FINANCIAL ASSISTANCE APPLICATION FORM

PERSONAL DETAILS			
Pupils Full Name:			
Parent/Carer's Full Name:			
Address:			
Post Code:			
Home Telephone No.		Mobile No.	
Email address:			
Activity for which funding is requested:			
Amount of funding requested: £			
Please produce evidence of expenditure va	lue for the amo	ount stated above.	
FINANCIAL CIRCUMSTANCES			
Your household income is an important fact hardship fund. Documentary evidence will be			ort from the
What is the total of your household income:	£		
Please attach proof of		e School Meals to application form	
	Tick as appropriate		Tick as appropriate
Student is in receipt of Free School meals		Students is not in receipt of Free School meals	
			•
SUPPORTING STATEMENT			
Your household income is an important fact hardship fund. Documentary evidence will be family financial circumstance, indicating why continue on a separate sheet if necessary)	oe required to	support your application. Please briefly ex	plain your



DOCUMENTATION TO SUPPORT THE APPLICATION				
To support this application, please tick which of the following documentation you will be using as total household income. Please attach this documentation to the application form.	s evidence of your			
ioini.	Tick			
Certified Accounts (if self-employed)				
Letter from the DWP awarding benefit				
Letter from the DWP acknowledging processing of benefit application				
P60 or March Payslip				
<ul> <li>Payslips (if you are paid monthly the most recent 3 months or if weekly, the most recent 4 weeks)</li> </ul>				
• Pension				
SA302 Form from HMRC (delete HMRC no longer issues SA302)				
Tax Credit/Universal Credit award notice				
Other means tested benefit				
GENERAL DATA PROTECTION REGULATION				
All information and supporting documentation supplied by you with this application will be used for assessing your application for financial help. Your application and some related information, income your application, will be held and maintained in accordance with Data Protection Act 199 superseded including from 25 May 2018 the General Data Protection Regulation). The data will not other third party without your consent, except when the Academy is required to do so by law.	luding the outcome 8 (as amended or			
DECLARATION				
declare that the information provided on this application form is accurate and no information has that would be relevant to my request for financial assistance.	s been withheld			
Signature of Parent/Carer:				
Full Name of Parent/Carer: Date:				
SUBMISSION				
Please return your Application Form and any enclosures in a sealed envelope for the attention <b>of</b>	f Mr S Frazer			

Principal, Guilsborough Multi Academy Trust, West Haddon Road, Guilsborough, Northampton NN6 8QE.

You will receive a response in writing within 4 weeks of submitting your application.



## For Office use only

To be completed by the consideration panel				
Panel members present:				
Full Name and Position:		Signature:		
Date of consideration of application:				
Decision outcome regarding the				
application:				
Reason for decision being made:				