

Spring 1- ½ Term Claim Form (must be submitted by the last day of term)

Name of Student:

Eligibility – please tick appropriate box

NO CLAIMS WILL BE PROCESSED WITHOUT VALID RECEIPTS

Discretionary Bursary	<input type="checkbox"/>	• Students whose household income is below £25,000 per annum. Agreed standards of behaviour and attendance should be met.
Vulnerable Bursary	<input type="checkbox"/>	• Those Students who receive income support/universal credit • Care Leavers or students who are looked after children • Disabled students in receipt of both Employment Support Allowance and Disability Living Allowance/PIP
Both	<input type="checkbox"/>	• Students who qualify for the Vulnerable Bursary but who require extra assistance with the costs of their education at Altrincham Grammar School for Boys.

Completed by Student Details of Assistance Requested	Completed by Student: Assistance requested	Completed by Office: Receipts Attached ✓	Completed by Office: Amount Granted £
Travel NO CLAIMS WILL BE PROCESSED WITHOUT VALID RECEIPTS			
Meals NO CLAIMS WILL BE PROCESSED WITHOUT VALID RECEIPTS			
Appropriate clothing to suit training and placement requirements. (Maximum Annual Allowance £110) NO CLAIMS WILL BE PROCESSED WITHOUT VALID RECEIPTS			
Equipment (Maximum Annual Allowance £70) NO CLAIMS WILL BE PROCESSED WITHOUT VALID RECEIPTS			
Any other NO CLAIMS WILL BE PROCESSED WITHOUT VALID RECEIPTS			
NOTE - Must fall within guide amounts			

Account Name

Account No Sort Code

If Account is a Building Society Account, also provide Roll No

OFFICE USE ONLY

Staff Name: _____

Staff Position: _____

Date Received _____ **Date Approved** _____

Spring 2 - 1/2 Term Claim Form (must be submitted by the last day of term)

Name of Student:

Eligibility – please tick appropriate box

NO CLAIMS WILL BE PROCESSED WITHOUT VALID RECEIPTS

Discretionary Bursary	<input type="checkbox"/>	• Students whose household income is below £25,000 per annum. Agreed standards of behaviour and attendance should be met.
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Equipment (Maximum Annual Allowance £70) <small>NO CLAIMS WILL BE PROCESSED WITHOUT VALID RECEIPTS</small>			
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OFFICE USE ONLY

Staff Name: _____

Staff Position: _____

Date Received _____ **Date Approved** _____

Summer 1- ½ Term Claim Form (must be submitted by the last day of term)

Name of Student:

Eligibility – please tick appropriate box

NO CLAIMS WILL BE PROCESSED WITHOUT VALID RECEIPTS

Discretionary Bursary		<ul style="list-style-type: none"> Students whose household income is below £25,000 per annum. Agreed standards of behaviour and attendance should be met.
Vulnerable Bursary		<ul style="list-style-type: none"> Those students who receive income support/universal credit Care Leavers or students who are looked after children Disabled students in receipt of both Employment Support Allowance and Disability Living Allowance/PIP
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Summer 2- ½ Term Claim Form (must be submitted by the last day of term)

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Staff Name: _____

Staff Position: _____

Date Received _____ **Date Approved** _____

Student Name :

Autumn 1- 1/2 Term Claim Form (must be submitted by the last day of term)

Eligibility – please tick appropriate box

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Vulnerable Bursary	<input type="checkbox"/>	<ul style="list-style-type: none"> Those students who receive income support/universal credit Care Leavers or students who are looked after children Disabled student in receipt of both Employment Support Allowance and Disability Living Allowance/PIP
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