

Application for help with PRIMARY SCHOOL CLOTHING

The information given will be treated as strictly confidential.
The fully completed form should be sent to the above address.

Tel: 020 8583 2820/2780

Director: Anthony Kemp

Incomplete forms will be returned.

Please use **capital letters** throughout.

BENEFIT CLAIMANT

TITLE: Mr/Mrs/Miss/Ms	NATIONAL INSURANCE NUMBER:	
YOUR SURNAME:	FIRST NAME(S):	
ADDRESS:		
POSTCODE:		
DATE OF BIRTH: Mother	Father	Guardian
HOME TELEPHONE:		MOBILE TELEPHONE:
RELATIONSHIP TO CHILD(REN) Mother <input type="checkbox"/>	Father <input type="checkbox"/>	Other <input type="checkbox"/>
MARITAL STATUS (Married/Widowed/Divorced/Separated/Single/Living with Partner)		

FOR YOU AND YOUR SPOUSE: PLEASE TICK THE BENEFIT(S) YOU ARE CURRENTLY RECEIVING

Income Support JSA Income Based Asylum Seeker
Child Tax Credit (provided you are *not receiving Working Tax Credit* and your household income is *less than £16,190*)

(PLEASE SUPPLY EVIDENCE valid within the last 6 month)

Have you applied for clothing assistance before? Yes No

ABOUT YOUR CHILDREN

Please list the children for whom this application is made:

Family Name	First Name/s	Date of Birth	Girl/Boy	School

As funding is minimal, we normally only allow **2 payments per family** whilst attending primary school as this is not a grant and is intended as a 'one-off' help with school clothing or shoes.

Payments will be issued for **ONE CATEGORY ONLY** to the value of £15 for each child in **FULL TIME PRIMARY** education.

Please tick **ONE** box only: School Sweatshirt from School
 Cheque of £15 for School Clothing/Shoes

Signed _____ (Mother/Father/Guardian) Date _____

For Office Use Only

Action:	Value:	Total payment:	Date issued:
Record Check:		Payment date:	