

GRANT AID

PRIMARY SCHOOL APPLICATION FOR A RESIDENTIAL TRIP

GUIDANCE NOTES

- 1. Grant Aid is provided in conformity with the Articles and Memoranda of Hitchin Youth Trust Ltd.
- 2. Grant Aid is restricted to Young Persons who have not reached their 26th birthday, who have been resident in the Trust's Operational Area for at least 12 months (see list below);. If you are in doubt regarding eligibility, need further information or help in completing this form, contact:-

The Hon Secretary, Hitchin Youth Trust Ltd, 111 Walsworth Road, Hitchin Herts SG4 9SP Tel. 01462 422505

- 3. Awards cannot generally be considered for overseas trips.
- 4. Grant Aid is awarded on the principle of providing the maximum benefit for those young people in the greatest need.
- 5. When considering applications for school trips, account is taken of the Parental contributions and the efforts to provide the finances needed for the trip. Account is also taken of any other funds available to the School.
- 6. Due to increasing demands on our funds the Trustees will only consider an application for **one** Primary School Trip per child. (Please make sure parents are aware of this if applying in year 4, they will not be considered again in year 6).
- 7. Applications for school trips can come directly from an individual or via a school. Both are required to have the form signed by the Head of the School. Hitchin Youth Trust may then contact this person to verify the application.
- 8. Awards made by the Trust may only be used for the trip declared on the initial application and payment will be made directly to the school.
- 9. Applications should be received at least 2 months prior to the trip taking place. However, we understand there maybe occasions where this is not possible and the Trustees will consider exceptions on a shorter timescale but NOT after a trip has taken place. Grants are not paid retrospectively.
- 10. Awards are limited and are intended to assist Applicants who have either exceptional financial difficulties, or other unusual or difficult circumstances. When completing the application, it is essential that the fullest information be given. Failure to do so may result in the application being rejected. Please return the completed application to:-

The Hon Secretary, Hitchin Youth Trust Ltd, 111 Walsworth Road, Hitchin Herts SG4 9SP

- 11. All applications are considered fully by the Trustees and decisions made on the basis of the information provided. Please complete all of the information requested leaving gaps in the information may cause delay or rejection. Further information is always welcome if you feel it is relevant and will support the application.
- 12. All information provided by the Applicant will be treated in the strictest confidence.
- 13. Please note that the information provided in the application may be made available again in the strictest confidence to the Hitchin Education Foundation.
- 14. The decision of the Trustees in respect of any application is final and they will not entertain any correspondence relating to the decision. All applications remain the property of Hitchin Youth Trust Limited.

Hitchin Youth Trust's Operational Area

If you are 25 or under and have lived in any of the following areas for the last 12 months you may be eligible for a grant:-

Ashwell, Barkway, Barley, Breachwood Green, Bygrave, Caldecote, Clothall, Cockernhoe, Codicote, Graveley, Hexton, Hinxworth, Hitchin, Holwell, Ickleford, Ippolyts, Kelshall, Kimpton, King's Walden, Knebworth, Langley, Lilley, Newnham, Nuthampstead, Offley, Pirton, Preston, Radwell, Reed, Rushden, St Paul's Walden, Sandon, Therfield, Wallington, Weston, Whitwell, Wymondley

PRIMARY SCHOOL APPLICATION FOR HELP TO FUND AN EDUCATIONAL TRIP

| School (Name and Address): | | | | | | | |
|--|----|--|--|--|--|--|--|
| Headteacher: | | | | | | | |
| Contact Person: Tel. No. : | | | | | | | |
| | | | | | | | |
| Details of the Trip | | | | | | | |
| Date from: Date to: Visit to: | | | | | | | |
| Breakdown of costs per child | | | | | | | |
| Fees, travel materials: £ Food and accommodation: £ Total cost of the trip: £ Contribution from school: £ | _ | | | | | | |
| (% contribution from school: | %) | | | | | | |
| Therefore total amount requested from parents: £ | | | | | | | |
| Are there any other trust funds available to the school for educational trips? YES / NO (Please delete as necessary) | | | | | | | |
| If 'YES' please give details | | | | | | | |
| What percentage of the trip is aimed to meet the requirements of the National Curriculum? | | | | | | | |

Please include any further supporting information for the trip with the completed form.

Please complete all details for each individual for whom a grant is requested

(Gaps in the information requested may cause delay or rejection)

| Leave Blank (Ref. No.) | Name and Address of Child | Age Yrs | Single parent Y/N | Number of children living in family home | Does child receive free school meals? Y/N | Does family receive at least one of: income support, job seekers | allowance, employment and support allowance, child tax | credits, working tax credits, universal credit? Y/N | Amount parent(s) agree to pay | Additional contribution from school funds | Amount of Grant Aid requested |
|---------------------------|---|------------|-------------------|---|--|--|--|--|-------------------------------|---|----------------------------------|
| | | | | | | | | | | | |
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| | | | | | | | | | | | |
| | rmally expect to see a 50% contribution tow lify for free school meals, please ask the fam | | | | | | | | | | |
| - | njy jor jree school medis, please ask the jam hitchinyouthtrust.co.uk). | ny to tt | Jiiipiett | oui Aut | aicionul II | ijorniati | טוו זטו דו | iiiui y Scilooi | τηρ τυππ (| ivaliable by (| zman ji om our o |

completed form. fice

I certify that to the best of my knowledge, the information given on this application is correct and I consider the Applicant(s) to be a suitable person to be considered for Grant Aid. I understand that I may be contacted by a representative from Hitchin Youth Trust to discuss this application.

| Signed (Headteacher): | Date: | |
|------------------------------------|-------|--|
| | | |
| Print full name in block capitals: | | |