



HARDSHIP ASSISTANCE FUND

What can assistance be claimed for?

The school will consider hardship applications in exceptional circumstances including but not limited to:

- Assistance with the purchase of a school uniform
- Assistance with the cost of music lessons
- Assistance with the cost of curriculum school trips
- Assistance with the cost of Duke of Edinburgh
- Assistance with any other essential costs, as determined by the school

Who can apply?

Students in receipt of Free School Meals or those affected by extreme or difficult personal circumstances may be considered for assistance.

Process

Letters regarding purchase of essential items and other relevant eligible opportunities will refer to the Hardship fund and link to the Hardship application form.

Applicants should complete and send the form into the school office. Applications will be considered by relevant members of the school's senior team (Deputy Head and School Business Manager) Each application is assessed considering individual circumstances and the school's available funding. Parents/carers will be informed in writing of the decision.

If the parent/carer is unhappy with the decision, they can appeal in writing within 5 working days to the Headteacher. The decision of the Headteacher is final.

How is it to be paid?

No money is paid directly to parents. If purchasing school uniform, the school will pay the provider directly. If the money is to be used for the purchase of essential school equipment e.g. shoes the parent/carer will need to provide the school with details so that an order can be placed directly with the supplier.



**Application form for Hardship Assistance
To be returned for the attention of the Deputy Headteacher**

Student: Tutor Group:

Address:
.....
.....

I would like to request assistance for:.....

Full cost:.....

Parental contribution:

Hardship Assistance requested:

Please provide details of your circumstances below:

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Please confirm how many children you have at BFS:

Is your child eligible for free school meals - Y / N

Signed: Date:

Relationship to student:

(Should you require assistance in completing this form please contact your child's Year Leader)

FOR SCHOOL USE ONLY: ASSISTANCE GRANTED: Y/N

AMOUNT OF ASSISTANCE AGREED:

DEPUTY HEADTEACHER SIGNATURE:

SCHOOLBUSINESS MANAGER SIGNATURE:

DATE:..... PARENT/CARER NOTIFIED: Y/N