



Registered Charity 218627

SUTTON COLDFIELD CHARITABLE TRUST

Lingard House, Fox Hollies Road, Sutton Coldfield, B76 2RJ

Tel 0121 351 2262

APPLICATION FOR SCHOOL CLOTHING GRANT 2018

To be eligible to apply you must be:

- A) A current resident of Sutton Coldfield in one of the following 4 Wards:- New Hall, Vesey, Trinity or Four Oaks and
B) in receipt of one or more of the benefits listed below. Please note maximum income levels will apply

Only ONE APPLICATION PER FAMILY (UP TO 4 CHILDREN) WILL BE ACCEPTED
Vouchers may only be redeemed at CLIVE MARK SCHOOLWEAR, BOLDMERE

School Stamp

Name of Parent/Guardian, Relationship to child(ren), Address including postcode, Tel/Mobile no., Email Address

Please attach a full set of your CURRENT benefit notification (within the last 6 months) as proof of the income you receive.
If you receive Working Tax Credit proof of income will also be required.
As this cannot be returned, a photocopy is requested. If this is not provided, a grant cannot be awarded

Table with columns: Benefit, Tick, Benefit, Tick. Rows include Income Support, Child Tax Credit, Working Tax Credit, Job Seeker's Allowance, Employment Support Allowance, Universal Credit, and Child's Name/DOB/Name of School.

IMPORTANT

Please ensure you have attached a copy of your proof of benefit and/or income

PLEASE TURN OVER THE PAGE to complete and sign this application

This form MUST be stamped by the school that issued it and returned to that school by FRIDAY 27 APRIL 201

We cannot process your application if it is not completed in full

FOR OFFICE USE ONLY

Amount Awarded .....

Vouchers Numbers .....

Authorised by ..... Date .....

**COMMON REPORTING STANDARDS COMPLIANCE (CRS)**

In order to deal with your application, it is necessary for us to keep a file containing information about you. Under the terms of Company Reporting Standard legislation (CRS), introduced in 2017, the Trust is now obliged, by law, to provide HMRC with certain information regarding the tax residence of grant applicants who receive assistance from the Trust and the following information is required:

Country of Residence for Tax Purposes : UK or OTHER ( **please delete as appropriate**)

If OTHER, please specify

Jurisdiction

Tax ID or National Insurance Number ..... Date of Birth .....

**HOW WE USE THE INFORMATION YOU HAVE PROVIDED**

- The information you have provided with this application will only be used to process your eligibility for a school clothing grant
- Your information will be stored on computer, in paper format or in other ways being used by the Trust for the purpose of processing your application
- Your information will only be shared with Trustees of the Trust and will not be shared with any third parties
- The Trust may contact your child's school to make enquiries relating to your application
- You are entitled to request a copy of the details held by the Trust about you.
- You have the right to object to this processing and if you wish to do so please contact the Trust by telephone, email or in writing. Please bear in mind that if you object it will affect the Trust's ability to award a grant for your benefit

Please sign and date this form to indicate that you have read and understood the above

I declare that all of the information I have given is true to the best of my knowledge

Signature ..... Date .....