



# High Storrs School

## **HARDSHIP ASSISTANCE FUND**

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Governors Committee : Resources

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## **HARDSHIP ASSISTANCE FUND**

### **What can assistance be requested?**

- Assistance with the cost of school trips and visits
- Assistance with the cost of one off items/equipment
- Assistance with any other essential costs, as determined by the remissions panel.

### **Who can apply?**

Students in receipt of FSM and those affected by extreme or difficult personal circumstances may be considered for assistance by the remissions panel. To be eligible for assistance from the hardship fund the student must be on roll in Years 7-11 in the academic year in which assistance is sought and have good attendance.

### **How is it to be paid?**

No money is to be paid directly to parents. If the money is to be used for the purchase of essential school equipment e.g. calculator the parent/carer will need to provide the school with details so that an order can be processed by the school.

### **Process**

- Letters about trips and visits will make reference to the Hardship Fund.
- Information about the Hardship Assistance Fund will be on the school website
- Parents/carers should contact the school office for further details.

Applications will be processed on demand and parents will get a response in writing from the remissions panel.

Applications will be considered by the remissions panel who will refer to previous assistance that the students have received, their individual circumstances and their attendance levels.

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

Minor Amendment November 2017



**APPLICATION FORM FOR HARDSHIP ASSISTANCE  
TO BE RETURNED FOR THE ATTENTION OF THE ASSISTANT HEADTEACHER  
MRS C GOTT**

Name of Student: \_\_\_\_\_ Form: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I would like to request assistance for: \_\_\_\_\_

To the value of: \_\_\_\_\_

Please provide details of your particular circumstances below:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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 Head of House.

**FOR OFFICE USE ONLY:**

ASSISTANCE GRANTED: Y/N

AMOUNT OF ASSISTANCE \_\_\_\_\_

AGREED BY: \_\_\_\_\_ DATE: \_\_\_\_\_

PARENT/CARER NOTIFIED: Y/N

FINANCE OFFICE NOTIFIED: Y/N

