

HARTISMERE SCHOOL

Application for Remission from Charges/School Uniform Support

Date:	Name of Student: Tutor Group:
Name of Parent/Carer:	Signature of Parent/Carer: Date:
	2000
Activity/funding required for:	Total Cost:
Reason for application/circumstances: (Please give details of benefits currently received)	
Does your child currently receive free school meals: YES/NO	
To be completed by the school	
Granted/N	
Amount and breakdown of subsidy granted:	Approved by:
Time given to pay:	Date:
Distribution List	
Finance Office:	Pastoral:
Trips and visits Administrator:	Pupil Services Administrator: