

Trust Reference: .....

## Richmond School Trust Request for Financial Assistance

In order to comply with new data protection regulations we need to ask for your consent for the information you supply on this form to be shared necessarily with the Head, the Finance Clerk, the Clerk to the Trustees, the Trustees, the Chair of the Trustees and also in some cases, the member of staff supporting the application. After your application has been processed, one copy will be retained for audit purposes by the Clerk. All other copies being destroyed at the end of the meeting. If you agree, please sign below.

Signed:

Date:

Name of Applicant:

Name of Parent/Carer:  
(if applicable)

Address:

Current Student:

Year:

Former Student:

From:

To:

Member of Staff:

If parents wish to give details of any personal circumstances which affect this request, please give them below:

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Purpose of Request (brief outline):

Date of Activity:

Cost of Activity:

£

Other Sources of finance/grants (ie parental contributions, other grant sources, etc):

Sum Requested:

£

### For School Use Only

Supporting comments:

Name:

.....

Position:

.....

Signature:

.....