

Outwood Grange Academies Trust

Hardship Policy and Grant Application Form

| Document control table | | |
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| Document title: | Hardship Policy | |
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Document History

| Version | Date | Author | Note of revisions |
|---------|----------|--------|--|
| VI | Nov 14 | КВ | |
| V2 | Apr 15 | КВ | Eligibility criteria updated |
| V3 | Jun 16 | КВ | Review – no revisions |
| V4 | Apr 18 | КВ | Eligibility, contact numbers and process updated |
| V5 | Mar 20 | КВ | Review - no updates |
| V6 | April 22 | BW | Wording re' trips clarified Household income threshold increased |

General Information for Parents and Guardians

What is the Hardship Fund?

The Hardship Fund is a discretionary source of financial help available to all registered full time Academy students. The aim of the Fund is to help students who have difficulties in paying for:

- 1. Curriculum trips, visits and year group residential (up to 100% of the cost). At the Principal's discretion this may cover up to 100% of the cost of other school trips.
- 2. Uniform, shoes or sports kit
- 3. Other materials or equipment required for their academic studies
- 4. Expenses to attend seminars, interviews or work experience placements
- 5. Emergency travel expenses

Payments from the Fund are discretionary and if awarded do not need to be repaid.

Post 16 students are requested to make an application in the first instance to the Bursary Fund, however this does not imply application cannot be made to the Hardship Fund.

The Academy will consider requests for hardship funding from the following groups of students:

- students living alone outside the family home
- students in receipt of free school meals
- students in families with very low incomes
- students with disabilities
- students who are or have been in care/foster care
- students who have been subject to other exceptional circumstances

Your Children may be eligible for grants from our hardship fund if:

- A household income of below £28,000
- A student whose parents are currently claiming other means-tested benefits including Income Support, Working Tax Credit/ Child Tax Credit, Income Based Employment and Support Allowance (ESA), Universal Credit, who is not entitled to free school meals
- At the decision of the Principal, any student who does not fall under the categories listed above, but consider themselves to be in financial hardship

Proof of Benefit is required. Proof must be in letter form and:

- Proof of benefit must have been issued within the last six months. Where applicable please provide a copy of the Full Tax Credit Award Notice (TC602).
- Proof must show the family address given
- Proof must be included with the grant application
- Bank Statements, incapacity, housing and council tax benefit are not valid proof.

Letters of Proof of Benefits can be obtained from:

- Inland Revenue Child Benefit Office 0300 200 3100
- Inland Revenue Tax Credits 0345 300 3900
- Jobcentre Plus
- Jobseekers, Income Support, Employment and Support Allowance 0800 169 0310
- Universal Credit 0800 328 9344
- Asylum Help UK 0808 8000 630

How to apply to the Hardship Fund

An application should be made through the Principal. The application will remain confidential and will be considered by the Principal given their knowledge of the student's circumstances. If approved by the Principal the application will be authorised and passed to the Academy Finance Manager to verify and action the transaction.

The payment will be made only in the following ways

- For emergency travel expenses the payment will be in cash
- For all other expenses the payment will be made through the Academy internal financial system directly to the supplier by receipt of invoice for goods purchased

A student may be able to apply for hardship support at any time during the academic year. It may also be possible to apply more than once, but usually only where circumstances have not changed. Students cannot appeal a decision not to award a hardship grant as the Principal's decision is final.

Please complete and return this form with the necessary supporting documentation to the Academy Principal.

Your Details

Please complete in capital letters

| Title: | Miss, Ms, Mrs, Mr or Other |
|--|----------------------------|
| Surname or Family Name: | |
| First Name: | |
| Partner's Surname (if applicable): | |
| Partner's First Name (if applicable): | |
| | |
| A dd | |
| Address: | |
| | |
| Postcode: | |
| Telephone: | |
| Email address: | |
| | |

Children you wish to claim for

| Name of child | Form Group and Year | Date of Birth | Gender (M or F) |
|---------------|---------------------------|---------------|--------------------|
| | | | |
| | | | |
| | | | |

Clothing Application

Items of clothing needed. Please provide sizes for items. If you need the same item of clothing for more than one child, please complete another copy of this page.

| Name of Child: | | | | | |
|----------------|--|--|--|--|--|
|----------------|--|--|--|--|--|

| Item | Tick if needed | Number needed | Size |
|----------------|----------------|------------------|-------------|
| Blazer | | | Chest: |
| Tie | | | Length: |
| Skirt | | | Waist: |
| Trousers | | | Waist: Leg: |
| Jumper | | | Chest: |
| PE polo shirt | | | Chest: |
| PE rugby shirt | | | Chest: |
| PE shorts | | | Waist: |
| Other: | | | |

School Trip Support Application

| Name of trip | |
|------------------------------------|--|
| Dates of trip | |
| Total cost of trip | |
| Amount paid to date | |
| Amount outstanding | |
| Amount of support requested | |
| Reason why you are seeking support | |

Children you wish to claim for

| Name of child | Tutor Group | Date of Birth | Gender (M or F) |
|---------------|----------------|---------------|--------------------|
| | | | |
| | | | |
| | | | |

Declaration

I certify that the information provided here is true. I understand that a false declaration will result in the refusal of this application.

| Parent or Carer's signature: | Date: |
|------------------------------|-------|
| | |

Your application will be processed in due course.

| Office use only | | | |
|-------------------------|----------|-----------------------|--|
| Date Received: | | | |
| Received by: | | | |
| Approved? | YES / NO | (delete as necessary) | |
| Approval Date: | | | |
| Approved by (name): | | | |
| Approved by (Position): | | | |
| Sign & Date: | | | |
| Finance Manager: | | | |
| Sign & Date: | | | |