The Foundation of Joanna Scott and Others

Grant Application – School Residential Trip

This application form is for school residential trips, covering any overnight or multi-night visit organised by the school as part of pupils' learning or development.

Please complete the form below and return via email or post to:

email: foundationofjoannascott@outlook.com
Post: FAO The Foundation of Joanna Scott Only, Martineau Hall, 21a Colegate, Norwich, NR3 1BN

Application in respect of:

Full Name of Child	
Date of Birth	
School	
How long has the child lived within 5 miles of City Hall?	
Parent 1 Name	
Parent 1 Occupation	
Parent 2 / Partner Name	
Parent 2 / Partner Occupation	
Address (inc postcode)	
Contact Number	
email address	

All Dependent Children Living at Home

Name	Date of Birth	Name of School/College/University currently attending

School Residential Trip details:

Please include a copy of the school's letter with the application.

Full details of trip	
Dates	
Cost of trip	
How much can you contribute	
Will the pupil receive Pupil Premium Funding for this trip	Yes / No
If Yes – how much will they receive? (if unsure please contact the school to confirm)	

Monthly Gross Income or Earnings

Income Source	**Amount**
Parent 1 monthly Salary (average including overtime and bonus)	
Parent 2 / Partner monthly Salary (average including overtime and bonus)	
Child Benefit	
Total	

Monthly benefits / other income details

Give details of **ALL** monthly benefits or other regular income amounts below

Monthly Expenditure

Only give details of the expenditure where **you** are responsible for making the payments from the income listed above - do not include amounts paid from Housing Benefit, Social Services etc.

	Amount
Rent	
Mortgage	
Council Tax	
Water charges	
Gas	
Electricity	
Internet	

I certify (please tick the boxes)

☐ I have declared my income and, if applicable, that of my partner accurately and in full

☐ I/we will inform you of any change in my/our circumstances

☐ I/we have not applied to any other grant-making body and have not received money or goods for the same purpose as for this application

We guarantee to hold this information securely, will use it for the purposes of contacting you regarding your application and will not pass it on to any other body save for due diligence checks with other charitable bodies under the lawful basis of legitimate interest.

☐ I agree for the Foundation of Joanna Scott and Others to hold my details

Signature of parent……Date……