KETTERING OLD GRAMMAR SCHOOL FOUNDATION

APPLICATION FOR A GRANT

1. FULL NAME OF PUPIL/STUDENT:

2. KETTERING ADDRESS:

Postcode: Date of Birth:

Home Telephone/Mobile E mail:

3. EDUCATIONAL HISTORY

(a) Primary and Secondary Schools Attended (give years attended for each school)

(b) Academic Qualifications (give grades)

4. REASON FOR APPLICATION:

(a) Higher/Further Education (state course) / Training (state course) / School Trip:

(b) Place

(c) Date(s)

(d) Cost of Course/School trip

(e) Details must be given if in receipt of other Grants/Donations/Scholarships.

For Schools: Please advise if a proportion of Pupil Premium will be allocated to the school trip

Yes/No Amount:

ALL GRANT APPLICATIONS ARE ASSESSED ON FINANCIAL NEED

Financial circumstances are to be listed in this section: e.g. Universal Credit, Disability Living Allowance or other relevant information to support grant application.

5. SIGNATURE OF APPLICANT or SIGNATURE OF PARENT (if applicant under 18)

DATE:

ALL APPLICATIONS MUST BE ACCOMPANIED BY A LETTER OF RECOMMENDATION FROM A SUITABLE SPONSOR (eg Headteacher/Course Tutor/Minister of Religion) TOGETHER WITH SUPPORTING DOCUMENTATION TO:

Mrs Margaret Swann, Clerk to the Governors, KOGSF, The Business Exchange, Rockingham Road, Kettering NN16 8JX

e-mail: admin@kogsf.org.uk Tel: 01536 526404

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