

**UNITED CHURCH SCHOOLS TRUST**

**Application by a Clergyman for reduced fees**

..... **School**

**CHILD FOR WHOM APPLICATION IS MADE :**

**Surname** ..... **Forenames**.....

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**Name of Applicant** .....

**Full Postal Address** .....

.....

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**Telephone Number (Daytime)**  
**(If available to be contacted)** .....

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**DETAILS OF PARENTS' INCOME**

**Please complete the details of your financial circumstances as requested overleaf.**

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**DECLARATION:**

**The following declaration should be signed by both parents (or see below).**

**I/We declare that to the best of my/our knowledge and belief, all the particulars here submitted are true and contain a full statement of my/our income from all sources during the periods shown.**

**Signature: Father** ..... **Date** .....

**Mother** ..... **Date** .....

**If the above declaration is signed by only one parent, please delete as necessary below:**

**Divorced/separated/widowed/other – state reason:**

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**This form should be returned to:** The Admissions Office  
Ashford School  
East Hill  
Ashford  
Kent TN24 8PB

**DETAILS OF PARENTS' INCOME**

Please complete the table below showing income from all sources, before deduction of tax, for the previous and current financial years (i.e. ending on 5<sup>th</sup> April).

	Previous Year (Actual) £	Current Year (Estimated) £	For School Use only
<b>Profession, business or trade of:</b>			
Father.....			
Mother.....			
<b>Earned Income:</b>			
Father.....			
Mother.....			
<b>Pension Contributions if not included above:</b>			
Father.....			
Mother.....			
<b>Occupational Pensions:</b>			
Social Security Benefits (please attach list).....			
Property Income.....			
Building Society Interest received..... (quote net figure).....			
Other Investment Income.....			
Separation or Maintenance Allowance.....			
Any other income not included above..... (please attach list).....			
<b>TOTALS</b>			

Name	Date of Birth	School	Annual Fees (if any)
1. Applicant for assistance.....			
2 .....			
3 .....			
4 .....			

**OTHER DEPENDENTS** who are financially dependent on the parents:

Name.....Relationship to father or mother.....

**OTHER GRANTS ETC** received in respect of the child for whom this application is being made, from any other source.

Details.....Amount £.....per annum

**ANY OTHER INFORMATION:** state here any special circumstances relative to the present application.

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 .....  
 .....

**SUPPLEMENTARY INFORMATION**

	Previous Yr Actual £	Current Yr Estimate £	For School Use Only
<b>Outgoings</b>			
a. Tax payable on incomes declared above (including tax deducted at source)			
b. National Insurance contributions			
c. Mortgage interest paid (state interest only and not instalments of mortgage repaid. Please enclose a copy of mortgage interest paid statement)			
d. Any other interest payable (please specify)			
e. Any annual rent payable on home			
<b>TOTAL</b>			

**ADDITIONAL DETAILS**

Source of Income	Previous Yr Actual £	Current Yr Estimate £	For School Use Only
.....	.....	.....	.....
.....	.....	.....	.....
.....	.....	.....	.....
.....	.....	.....	.....
.....	.....	.....	.....

	Father £	Mother £	For School Use Only
<b>CAPITAL ASSETS</b> (at date of signing this form)			
a. Approximate value of all investments			
b. Approximate value of house (if owned) (Agent's valuation may be required)			
c. Approximate value of other possessions (e.g. motor cars, house contents)			
d. Cash at banks or elsewhere			
e. Approximate value of any other assets (please specify on a continuation sheet, include market value of any insurance policies maturing in this tax year)			
f. Approximate market value of any additional property owned, either at home or abroad			
<b>TOTAL</b>			
<b>CAPITAL LIABILITIES</b> (at date of signing this form (Please give details of any capital charges against the assets declared			
a. Mortgage – amount outstanding			
b. Overdraft at bank			
c. Other loans			
<b>TOTAL</b>			