

Tonbridge Grammar School
Application for Financial Assistance

Name of student:		Learning Community:	
Support requested:			
Total cost of support:		Amount you are able to contribute:	
Reason for request: (please include relevant documentary evidence)			
Year 7-11	I have checked the eligibility criteria for Free School Meals and confirm that I do not qualify (please tick)		
Year 12-13	I have checked the eligibility criteria for Free School Meals and the 16-19 Bursary Fund and confirm that I do not qualify (please tick)		
If you are eligible for Free School Meals, please contact pupilpremium@tgs.kent.sch.uk for further advice If you are eligible for the 16-19 Bursary Fund, please complete the application form .			
Parent/Carer's Signature:			
Print name:		Date:	
Parent/Carer's email:			
Please return to school in a sealed envelope addressed to the Head Teacher			

Office Use only:

Request authorised:	yes / no	Amount to be awarded:	
Head Teacher's Signature:			

	Pitchford Fund	
	Debney	
	Fayerman	

Decision communicated to Parent/Carer