



# Holy Trinity C. of E. Primary School Pupil Bursary Fund Application Form

Name of Parent/Guardian	
Name of Student	
Class	
Home Address	
Contact telephone number	
Contact e-mail address	
Preferred method of contact	Phone / text / e-mail / letter

**Purpose:**

*please indicate what the assistance will be used for eg.books, trip, uniform, transport*

Amount requested: £

Total Cost: £

**Reason:**

*Please briefly explain why you are making this application eg: unemployment*

Signed:.....Date.....

Please return completed application form to  
Mrs K Smith Treasurer Holy Trinity School Governing Body