

**STROUD HIGH SCHOOL  
16-19 BURSARY  
REIMBURSEMENT FORM**

STUDENT NAME:	DATE:	BURSARY AWARD:
TUTOR GROUP:		LEVEL 1 LEVEL 2 LEVEL 3 LEVEL 4 LEVEL 5

<b>GIVE FULL DETAILS OF ITEMS PURCHASED AND ATTACH RECEIPTS.</b>	<b>ITEM PRICE</b>
<p>RECEIPTS FOR ITEMS UNDER £20 MAY BE BROUGHT TO FINANCE AND CLAIMED AS PETTY CASH.  <b>PLEASE RETURN THIS FORM TO FINANCE.</b></p>	TOTAL
	0

RECEIPT ATTACHED	YES/NO	AUTHORISED:
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**BANK DETAILS**

NAME OF ACCOUNT HOLDER: NAME OF BANK: BRANCH: SORT CODE: ACCOUNT NUMBER:	
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