Pupil Development Grant - PLUS

 01437 764551 Ext. 5813

# http://pccintranet/picvieworiginal.asp?image_id=5Pembrokeshire County Council

# Children and Schools Directorate

**Application for Pembrokeshire County Council Pupil Development Grant – PLUS 2019/2020**

1. Name of parent or guardian (Mr, Mrs, Ms or Miss) ……………………………………………...

Address …………………………………………………………………………………………………………

…………………………………………………………………………………………………………

……………………………………………………. Post Code…………………………………..

We may need to contact you for additional information or evidence, please provide a daytime telephone number ………………………..

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| --- | --- | --- | --- |
| **Name of child(ren)** | **Date of birth** | **Name of school** | **Year Group** |
|  |  |  |  |
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2. Please give details about your circumstances, why are you applying for this grant?

3. Please give an indication of your household income (please tick one box)

Under £10,000 £10,100-15,000 £15,001- £20,000 £20,001-£25,000 Over £25,000

4. Please list items you wish to purchase

|  |  |
| --- | --- |
| **Item** | **Cost** |
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|  |  |
| Total amount requested |  |

Decisions on applications will be made by the Pupil Support Officer for your school. We will always try to make a decision on your application as quickly as we can, normally within two weeks but we may need to contact you for additional information or evidence.

Please return completed form to Pembrokeshire County Council, Pupil Support, Practice Support Team, County Hall, Haverfordwest, Pembrokeshire SA61 1TP. Telephone number 01437 764551 ext 5813 or email Caroline.Huggins@pembrokeshire.gov.uk