



London Diocesan Board for Schools

Diocesan House, 36 Causton Street, London SW1P 4AU

Telephone: 020 7932 1100

Fax: 020 7932 1111

Website: www.london.anglican.org/schools

CITY & DIOCESE OF LONDON VOLUNTARY SCHOOLS FUND

APPLICATION FOR A GROUP GRANT FOR A SCHOOL JOURNEY/FIELD TRIP etc.

Please return the form to: Finance Officer
London Diocesan Board for Schools
36 Causton Street
London SW1P 4AU
Telephone 020 7932 1168
Email: dee.thomas@london.anglican.org

- Please note:**
- 1) Please make sure that the application form is returned to the above address.
 - 2) As it will be several weeks before you receive any reply to your application, please apply well in advance.
 - 3) Each pupil must have attended a Church of England School within the Diocese of London for at least two years.
 - 4) It is unusual to have more than one application per financial year accepted.
 - 5) Retrospective applications will not be considered.
 - 6) Payment of grant will be by direct transfer into the school's bank account (BACS).
 - 6) Deadline for submission of application:
28 February for Summer Term Journeys
30 June for Autumn Term Journeys
30 October for Spring Term Journeys

Head teacher or Nominee:

School:

Address:

Email:

Telephone:

Details school trip for which grant is sought: (continue on a separate sheet if necessary)			
Where :			
Date(s) of Journey:			
Educational purpose of the journey:			
Total estimated cost of journey per Pupil: £			
Total amount of grant claimed for all pupils: £			
Will the student or school be receiving help from the Local Education Authority or any other sources? If so, please give details:			
Details of bank account to pay grant money by BACS transfer			
Name of Bank	Account Name	A/C Number	Sort Code

Data Protection Act

In our effort to help pupils of Church of England Schools in the Diocese of London, we may seek the assistance of other similar Trusts and Charities either connected or known to us so that they can make grants directly to you based on the information given by you in your application to us. But we need your permission to pass your information to them.

I / We wish / do not wish to give my/our permission to pass or share information about my/our application for grant only for the purposes of grant making.

Signature of Applicant

Date

Name:

Age Now:

Date of Birth:

How long individual in current or previous C of E school

Explain the need for financial assistance:

Name:

Age Now:

Date of Birth:

How long individual in current or previous C of E school:

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Last updated on 17 March 2009