

**PUPIL PREMIUM APPLICATION
MOORLANDS PRIMARY ACADEMY**



We need information about you and your child, so that we can provide them with the best education and support by making sure that their school receives all the government funding to which it is entitled. Please complete this form and return to your child’s school.

	Parent/Guardian 1						Parent/Guardian 2					
First Name												
Last Name												
Date Of Birth												
NI Number												

Please place an X in this box if you would like us to check whether your child is eligible for pupil premium funding

DECLARATION

The information I have given on this form is complete and accurate. I understand that my personal information is held securely and will be used only for local authority purposes. I agree to the local authority using this information to process my application pupil premium funding. I also agree to notify the local authority in writing of any change in my family’s financial circumstances.

Signature of parent/guardian

Date

Thank you for completing this form and helping to make sure your child’s school is as well funded as possible.