**Application for school cash advance**

The purpose of this form is for the school to apply for an advance of funding. Schools can request the LA to pay a portion of their current year’s budget share payment in advance in order to meet their financial obligations.

**School Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**DfE Number:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Give reason(s) for needing cash advance:**

*Please tick all that apply.*

 Budget is in deficit.

 Temporary cash shortage

 Other – please state.

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**Please provide further details as to the reason for your request.**

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Cash advance required (£): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date advance is required: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date by which the advance will be repaid: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please provide the proposed payback profile.

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***Documents that must accompany this application:***

*Please tick appropriately. If previously submitted, please state the date. If the cash advance is due to the school having/forecasting deficit, the school must provide a recovery plan not exceeding three years.*

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| --- | --- |
|  **Attached** |  **Submitted date** |
|   |   | *Budget Statement for the current year*  |
|   |   | *Latest budget monitoring report* |
|   |   | *Cashflow statement that reflects the latest budget monitoring report* |
|   |   | *3-year deficit recovery plan* |

The LA may not consider your request for a cash advance in the absence of one or more of the above documents.

Headteacher’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Signature*

Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Chair of Governor’s name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Signature*

Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_