

Me Too!

EXTENDED SERVICES
IN SHERBURN AND BROTHERTON

Funding Application Form

A separate form must be completed for each activity for each child

Contact Information

Childs Name Age

School

Parent/Carers Name

Address Postcode

Telephone Mobile

How is your child eligible?

Free School Meals Looked After i.e. In Care

If you/your child are in contact with any of the following? Please provide their name and contact number below.

Social Worker

Name

Telephone No:

Youth Offending Team

Name

Telephone No:

Parent Support Advisor

Name

Telephone No:

Family Support Worker

Name

Telephone No:

Youth Worker/Integrated Youth Support

Name

Telephone No:

Other

Name

Organisation

Telephone No:

If this is a referral from School: Headteacher Name

Signature Date

Please turn over

Please return completed form to:
Extended Services, Sherburn High School, Garden Lane, Sherburn in Elmet, LS25 6AS

SELF REFERRAL FORM

Activity Information

You will need to book a provisional place on the activity you wish to take part in then complete the section below.

Activity Name

Activity Start Date and days*

Activity Start Time Hrs Length of Session/s

Cost of each session £

Any additional cost or information necessary to attend activity

Total cost requested

I confirm a provisional place has been booked on this activity please tick as confirmation

Contact Information for Activity Provider

This section must be completed in full in order to confirm we are able to pay the activity provider

Providers Name

Address

Telephone

Email address

Consent

I confirm that I would like the above named child to be considered for the Me Too initiative and would like him/her to attend the above activity if a place is available.

Signature Parent/carer

Date Must be dated

***All Me Too funding is subject to availability as is not guaranteed until you have received confirmation from Extended Services. At least 2 weeks notice is required prior to the activity start date.**

Please return completed from to:
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