

Privacy Notice - FOR ABERDEENSHIRE EDUCATIONAL TRUST

THIS FORM MUST BE SIGNED AND RETURNED WITH ATTACHED APPLICATION FORM

The Data Controller of the information being collected is Aberdeenshire Council.

The Data Protection Officer can be contacted at Town House, 34 Low Street, Banff, AB45 1AY.

Email: dataprotection@aberdeenshire.gov.uk

Your information is being collected to use for the following purposes:

- The processing of your application for an Educational Grant
- The determination of your application for an Educational Grant
- The award of any Educational Grant approved

Your information is being collected by Aberdeenshire Council

The Legal Basis for collecting the information is:

Personal Data	Special categories of personal data
Consent	The data subject has given explicit consent to the processing

Where the Legal Basis for processing is either Performance of a Contract or Legal Obligation, please note the following consequences of failure to provide the information:

Not Applicable

Your information will be shared with the following recipients or categories of recipient:

External Auditors

Your information will be transferred to or stored in the following countries and the following safeguards are in place:

Not Applicable

The retention period for the data is:

7 years

The following automated decision-making, including profiling, will be undertaken:

Not applicable

Please note that you have the following rights:

- to withdraw consent at any time, where the Legal Basis specified above is Consent;
- to lodge a complaint with the Information Commissioner's Office (after raising the issue with the Data Protection Officer first);
- to request access to your personal data;
- to data portability, where the legal basis specified above is:
 - (i) Consent
- to request rectification or erasure of your personal data, as so far as the legislation permits.

I understand that I have the right to withdraw this consent at any time by contacting trusts [@aberdeenshire.gov.uk](mailto:asataet@aberdeenshire.gov.uk)

Name
Date
Signature

**PLEASE SEND BOTH THE SIGNED PRIVACY NOTICE AND SIGNED APPLICATION FORM, TOGETHER WITH YOUR DOCUMENTATION (DO NOT SEND ORIGINAL DOCUMENTATION) TO THE FOLLOWING ADDRESS:-
 ABERDEENSHIRE COUNCIL, ASAT, P O BOX 18533, INVERURIE AB51 5WX OR
 EMAIL TO: ASATAET@ABERDEENSHIRE.GOV.UK**

ABERDEENSHIRE EDUCATIONAL TRUST – SECTIONS 24 AND 31

APPLICATION FOR GRANT AID FOR EDUCATIONAL TRAVEL/EXCURSIONS

SECTION 1 – Details of Excursion

Place to be visited and outline of activities	
Dates of excursion (from-to)	
Cost of excursion	

SECTION 2 – Details of Pupil Going on Excursion

Name of Pupil	
Date of Birth	
Home Address including Postcode	
Contact Telephone Number / email address	
School Attended	

SECTION 3 – Parents/Guardian Personal Details

	Parent/Guardian 1	Parent/Guardian 2
Parents' or Guardians' full names		
Please state relationship:- (e.g. mother, father, legal guardian, etc.)		

SECTION 4 – Your Income - Benefits

Are you / your partner receiving any of the benefit listed below:-	Parent/ Guardian 1	Parent/ Guardian 2
• Free School meals/School Clothing Grant		
• Housing Benefit/Council Tax Reduction		
• Child Tax Credit/Working Tax Credit (please provide a copy of your current award letter)		
• Income Support		
• Universal Credit		
• Income-based Job Seeker's Allowance		
• Any income related element of Employment and Support Allowance		
• Pension Credit Guaranteed Credit		
• Support under Part VI of the Immigration and Asylum Act 1999		

**If you have ticked any of the above boxes please continue onto Section 6
If you have not ticked any of the above boxes please continue to Section 5**

SECTION 5 – Income - Earnings/Other

	Parent/Guardian 1	Parent/Guardian 2
Earned Income		

Please provide copies of your last two pay slips if paid monthly and five payslips if paid Weekly

Employment:	Annual £	Annual £
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Self Employed

The net taxable profit for the year ending 5th April last or last completed trading year falling within that period. **Please enclose copy of latest tax return.**

Self Employment:	Annual £	Annual £
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Other Income

Give details of any other taxable income you receive (e.g. Pensions being State, Private, Forces, Widow's, Other Benefits etc) Please provide documentary evidence.

Type of Income:-	Annual £	Annual £
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Do you have capital and savings of more than £6,000.00	Amount £	Amount £
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If you have savings over £10,000 you will not qualify for a Grant.

Section 6 - DEPENDENT CHILDREN

Please give details of each child (other than the applicant) who is/are dependent on the parent(s) or legal guardian(s) of the applicant.

Name of child	Date of birth	School/College/University child is attending or is to attend

Section 7 – Parent / Guardian's Declaration

I _____ (name in full) being the parent/guardian of the pupil on behalf of whom this application is made, solemnly and sincerely declare that the statements contained in this application are to the best of my knowledge full and correct in every respect.

I consent to Aberdeenshire Support and Advice Team checking any information already held by Aberdeenshire Council on the basis that:-

- It can help determine my eligibility for a grant;

Signature of Parent/Guardian _____

Date _____

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