

Parental Voluntary Contributions

Dear Parents and Carers

Unfortunately, funding pressure on schools continues to grow. I have recently been in correspondence with Rt Hon Damian Hinds MP, Minister for Schools, regarding this matter and the 23% cut in real terms Sixth Form funding since 2010 as reported by the Institute for Fiscal Studies in December 2023. This makes us more reliant than ever on parent voluntary contributions which are, unfortunately, also diminishing due to cost of living pressures. The proportion of parents contributing £35 a month to the School Fund has fallen from 32% in 2021 to 23% in 2023. This means it is becoming harder and harder to keep class sizes under control, particularly in popular A Level subjects like maths, the sciences and economics. It also means it makes it much more likely that we will be forced to reduce the range of subject options we offer at A Level and GCSE as well as our co-curricular offering.

I would therefore ask, reluctantly, that if there is any way that you can help, please do. All the money will go directly into staffing our curriculum and co-curriculum to ensure your child has the first-class education that they deserve and to ensure they are able to compete for the very best university places.

If you can start donating, please use one of the following options:

- 1. You can set up a standing order for £35 a month using your online banking platform. Please also complete and email back the attached Gift Aid form which gives us an extra 25p per pound that you donate. The School's details are as follows:
 - Account Name: Wallington County Grammar School
 - Account Number: 40367860
 - Sort Code: 30 98 36
 - Account Type: Business
- 2. You can set up a standing order for £35 a month by completing and returning the attached Standing Order and Gift Aid Forms. The Standing order Form must be hard copy if you require a printed version pleas email accounts@wcgs.foliotrust.uk.

I would also ask that, if you work for a company that routinely donates to charities, please get in touch. Thank you for your generosity.

Yours faithfully

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Mr Jamie Bean

Headmaster Mr J Bean CROYDON ROAD WALLINGTON SURREY SM6 7PH Telephone 020 8647 2235 Email <u>enquiries@wcgs.foliotrust.uk</u> Website <u>www.wcgs-sutton.co.uk</u>

Wallington County Grammar School Gift Aid Form

Boost your donation by 25p of Gift Aid for every £1 you donate. Gift Aid is reclaimed by the School from the tax you pay for the current tax year. Your address is needed to identify you as a current UK taxpayer

In order to Gift Aid your donation you must tick the box below:

I want to Gift Aid my donation of £______ and any donations I make in the future or have made in the past 4 years to:

Name of School/Trust

I am a UK taxpayer and understand that if I pay less Income Tax and/or Capital Gains Tax than the amount of Gift Aid claimed on my donations in that tax year it is my responsibility to pay any difference.

My Details

| Title | Forename | | |
|----------------------------------|---|----------|--|
| Surname | | | |
| Address | | Postcode | |
| Signature (can be digital) | | Date | |
| Your Child's name | Form | | |
| Please notify the school if you: | | | |
| Change your n | el this declaration name or home address sufficient tax on your income and/or capital gains | | |

If you pay income Tax at the higher or additional rate and want to receive the additional tax relief due to you, you must include all your Gift Aid donations on your Self-Assessment tax return or ask HMRC to adjust your tax code.

Please return to the Finance Officer at Wallington County Grammar School



Parent Voluntary Contribution Standing Order Form

Details of the account from which payments will be taken:

| Bank / Building Society Name: |
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| Branch: |
| Address: |
| Post Code: |

Details of the account to which payments will be made to:

Account holder's name:

Account Number

Sort Code:

Signature:

| Account Name: Wallington County Grammar School Bank Name: LLOYDS Account Number: 40367860 Sort Code: 30 98 36 FOR FINANCE OFFICER'S USE ONLY Reference Number for Payment: Regular Payments: £ | | | |
|--|--|--|--|
| Account Number: 40367860 Sort Code: 30 98 36 FOR FINANCE OFFICER'S USE ONLY Reference Number for Payment: Regular Payments: £ | Account Name: Wallington County Grammar School | | |
| Sort Code: 30 98 36 FOR FINANCE OFFICER'S USE ONLY Reference Number for Payment: Regular Payments: £ Please pay on 1 st OR 15 th of each month. Date of first payment Date of last payment Your Details : Title: First Name: Address: Post Code | Bank Name: LLOYDS | | |
| FOR FINANCE OFFICER'S USE ONLY Reference Number for Payment: Regular Payments: £ Please pay on 1 st OR 15 th of each month. Date of first payment Date of last payment Your Details : Title: First Name: Address: Post Code. | Account Number: 40367860 | | |
| Reference Number for Payment: Regular Payments: £ Please pay on 1 st OR 15 th Of each month. Date of first payment Date of last payment Your Details : Title: First Name: Last Name: Post Code | Sort Code: 30 98 36 | | |
| Reference Number for Payment: Regular Payments: £ Please pay on 1 st OR 15 th Of each month. Date of first payment Date of last payment Your Details : Title: First Name: Last Name: Post Code | | | |
| Regular Payments: £ Please pay on 1 st OR 15 th of each month. Date of first payment Date of last payment Or pate of last payment Your Details : Title: First Name: Address: Post Code | FOR FINANCE OFFICER'S USE ONLY | | |
| Regular Payments: £ Please pay on 1 st OR 15 th of each month. Date of first payment Date of last payment Or pate of last payment Your Details : Title: First Name: Address: Post Code | Reference Number for Payment: | | |
| Date of first payment Your Details : Title: First Name: Address: Post Code | | | |
| Date of first payment Your Details : Title: First Name: Address: Post Code | | | |
| Date of first payment Your Details : Title: First Name: Address: Post Code | | | |
| Your Details : Title: First Name: Address: Post Code | Regular Payments: £ Please pay on 1 st OR 15 th of each month. | | |
| Your Details : Title: First Name: Address: Post Code | | | |
| Title: First Name: Last Name: | Date of first payment Date of last payment | | |
| Title: First Name: Last Name: | | | |
| Address: | Your Details : | | |
| Address: | | | |
| Post Code | Title: Last Name: | | |
| Post Code | Address. | | |
| | | | |
| Student's name Form Group | Post Code | | |
| Student's name Form Group | | | |
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Please send your completed form to the Finance Officer at WCGS. You will need to ensure the first payment is at least 14 days from the date of posting. If you are a UK taxpayer, then please make sure to complete the gift aid form so WCGS can claim an extra 25% on your donation. Thank you