

The final payment will be:

## DEFERRED PAYMENT APPLICATION

S	ECTION 1:	SCHOOL DETAILS			
School Name: Project Title:					
S	ECTION 2:	GOVERNORS' LIABILITY			
Anticipated Governors' Liability payable on project:					
Amount the Governors' are applying to defer:					
Please indicate the funding sources being used to cover the Governors' Liability:					
			Amoun	t £	
Α	School Budget				
В	School Reserves	5			
С	Fund-raising				
D	PCC				
E	Other				
Source of Other funding:					
Current value of School Reserves					
Outline of School Reserve Policy Please attach full reserve policy as appendix					
S	ECTION 3:	DEFERRED PAYMENTS			
Deferred payment term:					
Date of final repayment:					
The school will make annual payments of:					
Will the final payment be different?  Yes No					

## SECTION 4: SCHOOL FINANCES

The DBE has limited funds and must ensure the following questions, providing additional information of the providing additiona					
Why is the Governors' Liability unable to be budget? Please attach any available budgetar					
Why is the Governors' Liability unable to be funded immediatly from the other source listed in Section 2? Please attach any additional supporting information.					
Please provide any futher information (including any relevant budget documents) to					
support your application as an appendix w	ith this completed form.				
SECTION 4: CERTIFICATION BY	GOVERNING BODY				
The Governors have agreed to this application for any other SCA funding until all outstanding	n and fully understand that the school cannot bid g liability payments have been made.				
Signed on behalf of the Governing Body:					
Signature:	Name:				
	Date:				
Position:	Phone:				
Email:					