Putting Residents First

1. How many people over 18 live here?

3. What are the course details for each student?

Name & address of college



Council Tax Discount & Exemption Application Form - STUDENTS

A student application should be made for your term-time address only.

Please read the supplementary notes before completing this form and make sure you have all the evidence/information you need before you return it to the council. If you do not provide the evidence requested in the supplementary notes, your application may not be assessed.

Making an application for a discount or exemption is not grounds for non payment of council tax. Payment must continue to be made in accordance with the bill already issued until you have received confirmation that the request has been granted.

No discounts or exemptions will be granted retrospectively, except in exceptional circumstances.

Name	Term-Time Address	Student yes or no	Date of Birth
A)			
В)			
C)			
D)			
D)			

Course title

В)		
C)		
D)	stion of oticals.	
4. Periods and dura		
Start date	End date	Details of Syllabus (provide a copy)
A)		
В)		
C)		
D)		

YES/NO

ADDITIONAL INFORMATION

5. Are you a student nurse?

If yes, please refer to the supplementary notes and provide evidence as requested.

If no, please proceed to question 6

6. Is anyone in your home over the age of 18 and a non British Citizen, who is partner to, or dependant on a student making an application on this form?

YES/NO

If yes, please go to question 7

If no, please go to question 8

7. Please provide the name(s) of the students partner(s) and/or dependents and supply a copy of their passport confirming their visa status or letter from Home Office confirming status.

Name of partner or dependant	Relationship to student			
Does any of your course require you to do y YES/NO	work experience?			
If yes, please advise:-				
a) How much time is spent on work experien	nce?			
b) Is your course being undertaken as part of your employment? YES/NO				
9. If you are renting your home, please supply the	he following information.			
A) Tenancy Agreement				
B) Name of landlord: C) Address of landlord:				
O) Address of landiold.				
D) Landlanda asistaat talankana.				
D) Landlords contact telephone:				

Please com Office.	plete check list and sign and i	eturn this form to the Co	ouncil Tax			
☐ Have y	ou read the supplementary notes ou supplied a student certificate ou listed all occupants over 18 y	from your educational esta				
PHD Stude	<u>nts</u>					
Ш .	☐ Have you supplied the contract from your university?☐ Proof of fees paid?					
ACCA stud	<u>ents</u>					
☐ Have	ou supplied your exam results?					
DECLARAT	ION					
By signing	this form I declare the followir	ıg:				
knowledge statement documenta	formation on this form is cor and belief. I understand tha or representation that I kn tion that is false or fail to discl uires it, after this form is comp	at it is a criminal offend ow to be incorrect of ose information to the au	ce to make a r to provide thority where			
If a discoud	nt or exemption no longer app occuring.	olies I will notify the cou	ncil within 21			
administers form with of and private recovery of also share	d that this authority is under and to this end may verify the other internal departments, go sector organisations for the Council Tax and for the prevalus information with these agor administrating public fund	e information I have pro overnment agencies, loc e purpose of billing, c ention and detection of gencies and other bodies	vided on this al authorities ollection and fraud. It may			
Signature: Full Name:		Date:				
Email Add	ess:					
Student A						
Signed:		Date:				

Student B

Signed:			Date:	
Student C				
Signed:			Date:	
Student D				
Signed:			Date:	
It would be for more inf	helpful if you would give your tele ormation.	phone numbe	er, in case we	e need to ask
Name of c	ontact point:			
Telephon	e number:			
Email add	Iress:			