

SOUTH GLOUCESTERSHIRE COUNCIL

Chief Executive & Corporate Resources Department, Revenue Services

PO Box 1953, BRISTOL BS37 0DB

www.southglos.gov.uk

TEL: 01454 868003

**COUNCIL TAX DISCOUNT APPLICATION
FULL TIME STUDENTS IN HIGHER EDUCATION****FORM
B**

If there is a full-time student resident in your property you may be entitled to a discount on the Council Tax charge. Please note a discount cannot be awarded if you live in a household with two or more non-students or part-time students. Before filling in this form please read the notes overleaf.

SECTION 1

APPLICANT'S NAME (must be a person liable to pay the Council Tax on the dwelling)

COUNCIL TAX BILLING NUMBER

ADDRESS

DAYTIME TELEPHONE NUMBER

POSTCODE

SECTION 2

NUMBER OF RESIDENT ADULTS LIVING IN THE PROPERTY INCLUDING THE PERSON NAMED BELOW (i.e. persons aged over 18)

SECTION 3 - PLEASE ENTER THE STUDENT'S DETAILS BELOW IN INK AND CAPITALS

NAME

Student certificate enclosed?

YES

NO

(A certificate will have been issued automatically to students whose courses started in October 1992 or earlier - for courses started at a later date the college will issue a certificate on request). If for any reason the student is unable to obtain a certificate easily, please enter below details of the course being pursued and enclose alternative evidence of the student's status, or ask your educational establishment to complete the certificate overleaf.

NAME OF COLLEGE/UNIVERSITY

TITLE OF COURSE

DATE STARTED

DATE EXPECTED TO FINISH

HOW MANY WEEKS, EACH YEAR, DOES THE COURSE LAST?

HOW MANY HOURS, PER WEEK, ARE YOU REQUIRED TO STUDY?

SECTION 4 - DECLARATION BY APPLICANT

I declare that the information given on this form is true and accurate to the best of my knowledge and belief.

SIGNATURE OF APPLICANT

DATE

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You must notify the Director of Corporate Resources immediately if you have any change in circumstances.

This form should be returned to the Council's offices at the address shown overleaf.

ONLY TO BE COMPLETED IF STUDENT CERTIFICATE NOT ENCLOSED (SEE SECTION 3 OVERLEAF)

CERTIFICATE TO CONFIRM STUDENT STATUS

To be completed by the Principal, Registrar or similarly authorised individual of the educational establishment concerned.

In accordance with Schedule 1 to The Local Government Finance Act 1992 I certify that:

NAME

ADDRESS

is enrolled for the purpose of attending a full-time course of further/higher education at:

.....

and that the course commenced on

and is expected to end on

SIGNED: DATED:

PLEASE PRINT OFFICIAL STAMP
IN THE ADJOINING BOX

NOTES FOR APPLICANT

1. You do not have to complete this form unless you wish to claim a discount but if you provide false information you may be subject to a penalty of £70 and prosecution under the Theft Act 1978.
2. Any information provided will be treated in the strictest confidence but may be stored on computer and is therefore subject to the provisions of the Data Protection Act 1984.
3. In accordance with Schedule 1 of The Local Government Finance Act 1992 students shall be disregarded when calculating the number of adults resident, if they are:

A - UNDERTAKING A FULL TIME COURSE OF EDUCATION WHICH:

- 1 - exists for at least one academic or calendar year
- 2 - requires attendance for a minimum of 24 weeks each year
- 3 - requires periods of study, tuition or work experience amounting to a minimum of 21 hours in each week of attendance

and

B - ENROLLED WITH A PRESCRIBED EDUCATIONAL ESTABLISHMENT

such as University, College, or any other institution in England or Wales, established solely or mainly for the purposes of providing courses of further or higher education.