

**Council Tax Application For Discount For
Persons Aged Under 20 Years**
(internet version)

Name and Address

Date

Account Reference if known

This application form should be completed by the person who is liable to pay the Council Tax

Name of Student

Date of birth

Name and address of School/college

Details of course of further education

1. Subjects/course for which you are studying

2. Date commenced

3. Expected date of termination of course

4. Is tuition principally received otherwise than through correspondence

* YES

* NO

* Delete as applicable

5. Are the normal hours of tuition between 8.00 am and 5.30pm

* YES

* NO

6. Number of hours tuition per week

7. Is the course part of an employment training scheme?

* YES

* NO

If YES please give details of the training scheme

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8. The number of adults in my household is

DECLARATION

I accept responsibility for making this application and the information given on this form is true and accurate to the best of my knowledge and belief.

I am enclosing evidence from the school/college showing the course details.

Signature Date