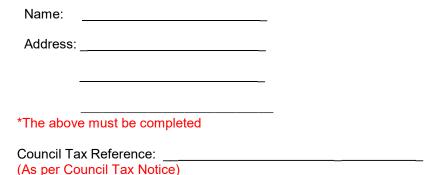
PLEASE RETURN TO:

NORTH LANARKSHIRE COUNCIL PO BOX 9060 MOTHERWELL ML1 1PF





Chief Executive's Office

Elaine Kemp Head of Financial Solutions PO Box 9060 Motherwell ML1 1SH www.northlanarkshire.gov.uk

COUNCIL TAX DISCOUNT-STUDENT

The Council Tax due on a property may be discounted to reflect the personal circumstances of the adult residents. Such a reduction will apply where less than two adults are resident in the property. For the purpose of the reduction, adults who meet the undernoted qualifying conditions shall be disregarded when counting the number of adults in the house.

If you want to apply for discount, please provide the information requested overleaf, sign the declaration and return the form to the address shown above.

QUALIFYING CONDITIONS FOR: STUDENT

- 1. A person taking a specified course of education at a U.K. university of further education establishment which lasts for at least 24 weeks within each academic year and where the period of study consists of an average of at least 21 hours per week.
- 2. A person, aged under 20, taking a specified course of education at an educational establishment where the period of study exceeds, on average, 12 hours per week and the course taken is not as a consequence of an office or employment held, nor arranged under any of the youth training schemes.
- 3. A person registered with the Central Bureau for Education and Exchange and working as a foreign language assistant at a school or other educational institution in Great Britain.





DISCOUNT: STUDENT

SECTION 1: To be completed by a liable person. I apply for discount on the basis that

(name)	Date of Birth / /
Meets the qualifying conditions noted overlea	ıf. in paragraph number
The number of adults (including the above na	amed) usually resident in the house is
SECTION 2 : To be completed by the Educ	cational Establishment.
NB: Students studying at the UWS and NC provided by the University/College electrons	CL <u>do not</u> require to complete this section as information is inically
I confirm that the above person is taking the	following course of education:-
Certificate / Qualification:	
Course Name:	
Course Start Date: / / Course End Da	ate: <u>//</u> .
Length of course within academic year:	_months
Average attendance per week:hours.	
ESTABLISHMENT STAMP	
	Signed:
	Position:
	Date : / / .

DECLARATION

I DECLARE that I will notify the Council within 21 days of any change in circumstances which may affect my liability e.g. discount status no longer applies or the number of adults in the house increases.

NOTICE UNDER THE DATA PROTECTION ACT & INFORMATION GOVERNANCE

It is an offence to give false information. Make sure that you understand what you have written before you sign the declaration. Any claim that is found to be fraudulent may be passed to the Procurator Fiscal and may be subject to criminal prosecution. We may check information provided by you, or information about you provided by a third party, with other information held by us. We may also get information from certain third parties, or give information to them to check the accuracy of the information to prevent or detect crime or to protect public funds in other ways, as permitted by law. These third parties include Government Departments, Local Authorities and Credit Reference Agencies.

ddress.

NOTE: - It would assist the Council if you notify the Head of Financial Solutio	ons in the event of a change of a
Signature of Liable Person:	Date: <u>//</u> .