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**SCHOOLS OPENING A BANK ACCOUNT FROM 1 APRIL**

|  |  |  |
| --- | --- | --- |
| School No |  | |
| School Name |  | |
| Estimated Year End Balance as @ 31 March | | £ |
| Date of training session to be attended at Westfield | |  |

**Details of Bank Account**

|  |  |  |
| --- | --- | --- |
| Bank Name |  | |
| Bank Address |  | |
| Sort Code |  | |
| Account Number |  | |
| Bank mandate complies with section 3.5.1 of the scheme for financing schools and states that LCC is the owner of all funds (copy to be emailed) | | Y/N |
| Headteacher's Signature | |  |
| Headteachers Name | |  |
| Chair of Governors Signature | |  |
| Chair of Governors Name | |  |
| Date | |  |

Please e-mail the return to [ctcypsabt@lancashire.gov.uk](mailto:ctcypsabt@lancashire.gov.uk) by 3 February