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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 by 3 February