

Date:  
Our Reference: **WEB**  
Your Reference:

Dear Sir/Madam

**Disregarded person for the purpose of Council Tax**  
**Full time student**

To claim Council Tax discount of 25% for a person who is a student, (and where there is only one other adult resident in the property who is not disregarded), please complete section A of this form and return to the above address.

Where a property is occupied solely by a student or a spouse is a non-student and not a British citizen and that person is prevented from working or claiming benefits, the property may be exempt from payment of Council Tax. If you feel this exemption may apply please complete section B as well.

**Please use capital letters.**

**SECTION A**

Name of student:
Address:
Date of Birth:
Course dates:
Name and address of educational establishment attended:

Please list below all people aged 18 or over living at the address, and state if any are already disregarded for Council Tax purposes.

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

**PLEASE ENCLOSE YOUR STUDENT CERTIFICATE WITH THIS APPLICATION**

Continued overleaf

**SECTION B**

Name of spouse: \_\_\_\_\_

Their nationality: \_\_\_\_\_

Entry visa number: \_\_\_\_\_

**NOTES FOR GUIDANCE**

A person is to be regarded as undertaking a full time course of education on a particular day, if he or she is on that day enrolled for the purpose of attending such a course with a prescribed educational establishment.

A full-time course of education is one which:

- a) subsists for at least 1 academic year;
- b) the duration of the course should be for at least 24 weeks in each year; and
- c) requires study, tuition or work experience for an average of 21 hours a week.

A prescribed educational establishment is defined as:

- a) a university
- b) a theological college
- c) any other institution established for providing courses of further or higher education.

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**DECLARATION TO BE SIGNED BY THE APPLICANT.**

**WARNING: Deliberately given false information could lead to the imposition of a £70 penalty.**

I declare that the information given is complete and accurate to the best of my knowledge. I understand that the Council may check the validity of the information provided.

Full name:

Date:

Signature:

Daytime telephone No.:

Email address:

Do you wish to view your Council Tax account & bills on-line: Yes / No

**PLEASE NOW RETURN THIS FORM TO THE ABOVE ADDRESS**