

Flintshire County Council Licensed Deficit Application and Recovery Plan

School Name

What level of deficit are you applying for:-

<u>2016/2017</u>	<u>2017/2018</u>	<u>2018/2019</u>	<u>2019/2020</u>	<u>2020/2021</u>
<u>£</u>	<u>£</u>	<u>£</u>	<u>£</u>	<u>£</u>
£0,000	£0,000	£0,000	£0,000	£0,000

There is an expectation that schools will recover deficit budgets within 3 years and in exceptional circumstances 5 years. Please document the reasons in the box below if the deficit application exceeds 3 years. Please note that where a school applies for a deficit recovery plan in excess of 3 years further authorisation is required from the Chief Education Officer and Chief Finance Officer.

Reason for Deficit

Please include in this section the reasons for the deficit budget and the circumstances leading up to the current position

Recovery Plan

Please include in this section a detailed narration of the recovery plan including the action to be taken and detailed timescales which link in with your agreed projections as approved by your governing body. (Please attach a copy of the minutes from your finance sub-committee as evidence of approval)

<i>Action</i>	<i>Target Date</i>	<i>Value of Saving £</i>

Additional Information to support your request for an agreed deficit.

Please attach your detailed budget plan using the deficit recovery plan excel spreadsheet.

School

Signed _____ **Headteacher** Date _____

Signed _____ **Chair of the Governing Body** Date _____

Signed _____ **Chair of the Finance Committee** Date _____

Authority

Signed _____ **Chief Education Officer** Date _____

Signed _____ **Finance Manager (Education)** Date _____

Signed _____ **Chief Finance Officer** Date _____