



North
Northamptonshire
Council

BUSINESS CASE FOR LICENSED DEFICIT - CONFIDENTIAL

Name of School (s)		DfE Number	
Effective Date of Proposed Licensed Deficit			

1. Details of the proposal for Licensed Deficit

2. Please give full details of:

a) Recovery plan

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b) Proposed timelines

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3. Declaration

- a) I hereby certify that the above gives a correct statement of the school balance and request a licensed deficit.
- b) I have attached all the attachment requested in the checklist and give a correct statement of the cash balance held at the bank and of the reconciliation to the bank account on financial system
- c) I hereby certify that the Recovery plan is signed by the governing body.

Signed		Date	
Name	Chair of Governors Head teacher		

Checklist of Attachments – where applicable	Attached (please tick)
	Yes
SIMS Outstanding Order Report.	
SIMS Balances and Reserves Report	<input type="checkbox"/>
NNC 3 year budget planning tool	<input type="checkbox"/>
Revised 3 year budget plan showing proposed savings	<input type="checkbox"/>
Completed SB1 (Maintained Schools Balance Scheme)	<input type="checkbox"/>
Supporting evidence form. (Annex A,B,C,D,E)	<input type="checkbox"/>
Governor meeting minutes for approval of recovery plan	<input type="checkbox"/>

The original signed business case and attachments are to be sent to:

Schools Supports Team Manager
Cathryn.Walker@northnothants.gov.uk

For Council use:

School Supports Team Manager					
Signed		Date		Name	
Finance Business Partner					
Signed		Date		Name	
Strategic Finance Business Partner					
Signed		Date		Name	
AD Finance & Strategy, AD of Education					
Signed		Date		Name	
Signed		Date		Name	