## South Cambridgeshire District Council

## Council Tax Supporting Evidence

## Application for an Apprentice Disregard

This form is to be used to provide supporting evidence once an application has been made online for a disregard.

Please complete the information below and then pass the form to the employer of the apprentice for completion and return.

apprentice for completion and return.
Please provide the name and address of the apprentice:
Council Tax account number (beginning 1010):
This form should now be passed to the employer of the apprentice for whom this application is

This form should now be passed to the employer of the apprentice for whom this application is made.

We process your data in line with our legal obligation to collect Council Tax. We may process the information you provide to prevent and detect fraud and may supply information to government agencies, credit reference agencies, audit or other external bodies for such purposes. We may share information provided within the Council to assist with the delivery of Statutory functions. We participate in the government's National Fraud Initiative, and further information is on our website: <a href="https://www.scambs.gov.uk/content/national-fraud-initiative">https://www.scambs.gov.uk/content/national-fraud-initiative</a>

The General Data Protection Regulation (GDPR) updates your rights regarding how your data is processed. More information regarding this can be found here

https://www.scambs.gov.uk/content/privacynotice

Employers Certificate		
(to be completed by the employer of the apprentice)		
Name of the apprentice:		
To the Employer		
Council Tax legislation makes provision for certain categories purposes of the tax. A claim has been received for such a disabove on the grounds that he or she is an apprentice. To allow you please confirm that in the case of the applicant, the presare being met:	scount from the person named ow me to consider this claim, can	
<ul> <li>They are employed for the purpose of learning a trade employment or vocation.</li> </ul>	e, business, profession, office,	
b) They are for that purpose undertaking a programme of training leading to a qualification accredited by the National Council for Vocational Qualifications or the Scottish Vocational Educational Council; and		
c) They are employed at a salary or in receipt of an allowance or both, which are, in total –		
<ul> <li>i) substantially less than the salary he or she would be likely to receive if he or she had achieved the qualification in question; and</li> <li>ii) no more than £195.00 gross per week.</li> </ul>		
Please Note: Both criteria in sub-paragraphs (i) and (ii) <b>must</b>	t be met.	
I certify that for purposes of the Local Government Finance A employment of:	Act 1992, the conditions of	
	(Name of apprentice)	

Satisfies the prescribed apprentice criteria listed above.

Start date of apprenticeship:

Expected date apprenticeship will end:

Employer's Signature:	
Date:	
Name and Address of Employer's Organisation:	
When you have signed this form please return it to:	
Council Tax Team, South Cambridgeshire District Council	
South Cambridgeshire Hall	
Cambourne, Cambridge	
CB23 6EA	

Telephone. 0345 0450 064