



For office use only:

Client ID	
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FAMILIES IN CRISIS APPLICATION FORM

IMPORTANT NOTES ON THE GRANT APPLICATION PROCESS

Application form

Are you using the correct application form? This application form is for the **"Families in Crisis" Fund only**. Details of other funds and application forms can be obtained from the Family Action website at www.family-action.org.uk.

Purpose of the Fund

Save the Children and British Gas have provided funds to help families who are struggling in the recession. The money will be given to help people pay for basic essentials.

Funds are available for clothing and household needs such as beds and cookers but we can also help with more varied needs such as school uniforms, baby's equipment, children's bedroom furniture and school trips and activities.

Funds are not available for:

- council tax arrears
- debts (except utility bills)
- fines
- gifts (such as toys for birthdays, Christmas or other festivals)
- items already covered by statutory funding
- rent arrears
- repayment of Social Fund or other loans
- bankruptcy

Eligibility (Families in Crisis Fund)

Assistance is primarily targeted at low income families with children and/or any young person (up to the age of 18 years old), particularly those living on benefits or who have just lost their jobs.

Application Procedures

- Please provide **all** the information requested on the form: appended documentation will not be accepted, with the exception of the supporting statement. Applications will not be processed if any part of the form is
- incomplete.
- The referring agency must provide a full supporting statement on agency letterhead. The statement must
- demonstrate how the applicant meets the criteria and how a small grant would make a difference to the life of the applicant.

1. Personal details of applicant

Title: Mr Ms Mrs Miss Other (specify).....

Family name.....Forename.....

Address.....

.....Postcode.....

Date of birth...../...../..... Age.....

Does the applicant have a mental or physical disability: No Yes

If yes, please provide details.....

Family Status: Couple without children Couple with children Single Single parent

What kind of accommodation does the applicant occupy? Council tenant Owner occupier

Housing association Part owner Refuge/Hostel Other (please specify)

5. Financial details

5.1 Details of applicant's **WEEKLY** income and expenditure - **monthly figures will not be accepted.**

Income and expenditure of the **WHOLE** household including any partner or other household members is required.

	WEEKLY INCOME		WEEKLY EXPENDITURE	
Housing Benefit	£.....	Rent/mortgage	£.....	
Council Tax Benefit	£.....	Council Tax	£.....	
Earned income	£.....	Housekeeping (food etc)	£.....	
Working Tax Credit	£.....	Water Rates	£.....	
Income Support	£.....	Gas	£.....	
Child Benefit	£.....	Electricity	£.....	
Child Tax Credit	£.....	Telephone	£.....	
Jobseeker's Allowance	£.....	Repairs and maintenance	£.....	
NASS	£.....	Laundry	£.....	
Retirement Pension	£.....	HP/Clubs	£.....	
Pension Credit	£.....	Fares/Car	£.....	
Private pension	£.....	Home help	£.....	
Widow's Pension	£.....	Care charges	£.....	
Maternity Allowance	£.....	Childminding	£.....	
Incapacity Benefit or SSP	£.....	Television	£.....	
Carer's Allowance	£.....	Debts	£.....	
Disability Living Allowance	£.....	Other (specify)	£.....	
Attendance Allowance	£.....	Other (specify)	£.....	
Guardian's Allowance	£.....	Other (specify)	£.....	
Other (specify)	£.....	Other (specify)	£.....	
Total income	£.....	Total Expenditure	£.....	

5.2 Are there any direct deductions from benefits? Yes No

If yes, please specify.....

5.3 Give details of any savings £.....

5.4 Give details of any debts including repayment schedules.....

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6. Details of referring agency

How long has the applicant been known to you? Years Months.....

Tel No: Fax Email

Referring agent name and address

It is important that the following information is provided **INSIDE** the box on the left, as if we need to return the form to you, this is used in a window envelope. We need the name and job title of the agency contact, followed by the agency name and address.

7. Cheque payee

IMPORTANT: Cheques are NEVER made payable to individuals. All payments MUST be processed via the referring agency and will only be made payable to the referring agency account or to a service provider such as a telephone company or utilities provider. Cheques will be sent to the named worker at the address provided in Section 6 of this Grant Application Form.

Cheques made payable to

8. Authorisation

IMPORTANT: We are unable to process applications that have not been properly completed and authorised. Before signing please check that the form has been fully completed. **Incomplete or unsigned forms will be returned to the referring agency.** Three signatures are required as follows: the applicant, the referring agency worker and their supervisor.

The information on this form is correct to the best of my knowledge and belief.

Data Protection: By signing this form the applicant agrees to the information on the form being stored in Family Action's manual filing system and summarised electronically for the sole purpose of grant processing, analysis, auditing and accounting. All information will be treated in the strictest confidence and will not be divulged without the prior agreement of those concerned.

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Signature of applicant Date

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Signature of referring worker Date

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Signature of supervisor Date

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Trust Recommended Date of meeting

Panel decision

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Completed form AND supporting statement should be sent to Grants Administration at the address below.