

*Helping more people, helping people more...*



## **APPLICATION FOR ASSISTANCE**

### **About the Charity**

Beeston Consolidated Charity (Registered Charity No. 1164090) exists for those people in Beeston who can be helped by the provision of financial and/or other resources. This can be in the form of small grants to individuals, families or organisations to help to purchase items, services or facilities. We are governed by certain restrictions – for example, we are not allowed to provide finance to pay Council Tax, rates or other taxes or public funds.

### **Advice on applications**

Applicants must live within Beeston (or its immediate vicinity) and have a particular need or reason for wanting assistance. If you meet these criteria, please complete the rest of this form – the more information you can give us, the easier it will be to deal with your application. Please be assured that all information you give will be treated in the strictest confidence. We cannot promise to help everyone who applies to us, but all requests will be looked upon as sympathetically as possible. Please note that, if your application is successful, we cannot guarantee to be able to repeat or renew the grant on any future occasion.

Please be aware that applications will be assessed on the basis of the information you provide. You must provide us with accurate, complete and true information at all times.

Please answer all sections as fully as possible. If a question is not applicable, do not leave the answer blank but write "N/A" or "None".

If more space is needed, please continue on a separate sheet of paper

Please post the completed form to the address below, together with copies of any relevant quotations/bills and any additional information or supporting documents. We may also require proof of identification.

When completed this application form should be returned to:

**BEESTON CONSOLIDATED CHARITY  
P O BOX 10425  
NOTTINGHAM  
NG9 9GN**

We will process your application and advise you of our decision as soon as possible after we receive it.

We treat all information on or with this form as confidential unless you say otherwise or it is publically available anyway.

If you would like any help in completing this form, please telephone **07854 310 327**

## SECTION 1 - APPLICANTS' DETAILS

If you are making a joint application with a spouse or partner, please provide these details for each applicant, stating your relationship with one another. Both applicants must read the declaration and sign the form in the spaces provided on page 7.

### APPLICANT 1

**About Yourself** (Please complete in BLOCK CAPITALS)

**Surname** ..... **Mr/Mrs/Miss/Ms/Other** .....

**First Names** .....

**Address** .....

.....

.....

**Postcode** **NG9** .....

**Telephone** **Daytime** .....

**Evenings**.....

**Email address** .....

**Date of Birth** .....

### APPLICANT 2

**About Yourself** (Please complete in BLOCK CAPITALS)

**Surname** ..... **Mr/Mrs/Miss/Ms/Other** .....

**First Names** .....

**Address** .....

.....

.....

**Postcode** **NG9** .....

**Telephone** **Daytime** .....

**Evenings**.....

**Email address** .....

**Date of Birth** .....

**Current Relationship Status:**

Single/Married/Separated/Divorced/Widowed/Partner

**Reason for your application**

**What circumstances have led to your current situation?**

**What items, services or facilities do you need to obtain?**  
(These must be specific items, etc rather than vague ideas)

**How will these help to improve your circumstances?**

**How much will this cost?**

**SECTION 2 - LIVING CIRCUMSTANCES**

In your current accommodation are you:

(Please tick) Owner..... Tenant..... Lodger..... Sharing with friends/family.....

Do you own or rent any other property? Yes/No (if "Yes", please provide further details.....)

**Other people living in the household**

Name	Age (if under 18)	Relationship to Applicant	Are they financially dependent on you? Yes or No. If No, what is their source of income e.g. working/on benefit?
.....	.....	.....	.....
.....	.....	.....	.....
.....	.....	.....	.....
.....	.....	.....	.....

**SECTION 3 - FINANCIAL INFORMATION**

Please note that we may ask for documentary evidence to support your application and we may undertake credit reference checks on individuals to verify information given.

**SAVINGS AND DEBTS**

ANY SAVING AND INVESTMENTS	ANY DEBTS AND ARREARS (include loans, hire purchase, clothing clubs, catalogues, credit cards, etc)
..... £.....	..... £.....
..... £.....	..... £.....
..... £.....	..... £.....
..... £.....	..... £.....
..... £.....	..... £.....

**Comments**

**INCOME AND OUTGOINGS (please give MONTHLY figures)**

MONTHLY INCOME		MONTHLY OUTGOINGS	
Earnings	£.....	Housing	£..... (please indicate rent/mortgage)
Pension - State	£.....	Council Tax	£.....
- Other	£.....	Water Charges	£.....
Child Benefit	£.....	Gas, Electric and other fuel	£.....
Tax Credits	£.....	Food	£.....
Other Welfare/National Insurance Benefits (please list)		Insurances	£.....
.....	£.....	Telephone (charges & calls)	£.....
.....	£.....	Broadband	£.....
.....	£.....	Television (licence & rental)	£.....
.....	£.....	TV subscription package	£.....
.....	£.....	Travel costs (fares, petrol)	£.....
Lodgers'/Tenants' payments	£.....	Car costs (tax, insurance, servicing, MOT)	£.....
Any other income (please list)		Hire purchase payments	£.....
.....	£.....	Credit card repayments	£.....
.....	£.....	Clothing club/catalogue payments	£.....
.....	£.....	Any other expenses (please list)	
<b>TOTAL MONTHLY INCOME</b>	<b>£.....</b>	.....	£.....
		.....	£.....
For a single parent or guardian family with dependent children, can financial help be obtained from the other parent?		<b>TOTAL MONTHLY OUTGOINGS</b>	<b>£.....</b>
Yes/No			
If not, please explain why not.			
Please confirm you are in receipt of all Welfare benefits you are entitled to			
Yes/No			
If not, please explain why not.			

**SECTION 4 - APPLICATIONS TO OTHER AGENCIES OR CHARITIES**

Receiving grants from other charities does not necessarily mean that we will be unable to assist you, but it is vital that we are kept informed of other funds you receive as it may affect the level of support that each charity is able to offer.

Agency or charity	Amount	Grant or loan?	Status: Requested/Being Considered/Approved/Paid
.....	.....	.....	.....
.....	.....	.....	.....
.....	.....	.....	.....

**SECTION 5 - DECLARATION BY THE APPLICANT(S)**

I declare that the information given on or with this form is complete and accurate to the best of my knowledge.

I understand that this form and maybe the supporting documents contain personal data and you will be holding and using them to deal with my application and that they may be shared with other local charities and such like where you consider that they may be able to provide me with relevant support. You will be processing that data in accordance with your Privacy Notice on your website ([www.beestonconsolidatedcharity.org.uk](http://www.beestonconsolidatedcharity.org.uk)) and if I need a copy I will ask you for one.

I realise that any information that I have provided which relates to someone's health is especially sensitive and I understand that, by submitting that information, I am confirming that I am allowed to provide it and that it will be held and used in the same way as the other personal data I provide. I give consent for that special data to be processed by you until I notify you otherwise. I realise that it may not be possible for you to immediately delete that data on request as there may be legal or technical reasons that delay that or otherwise override my request.

<b><u>Applicant 1</u></b>	
Signed.....	Date.....

<b><u>Applicant 2</u></b>	
Signed.....	Date.....

**SECTION 6 - STATEMENT BY REFERRING AGENCIES (if appropriate)**

I support this application for assistance on the basis of the applicant's real need, hardship or distress.

Name.....	Position.....
Agency & address ..... ..... .....	Telephone.....
Postcode.....	Email.....
Signature.....	Supporting letter attached: Yes/No
	Date.....

**FOR OFFICE USE ONLY**

Date rec'd.....	Amount paid £.....
Amount requested £.....	Date paid .....
Approved/Declined.....	Chq No. ....
Applicant advised Yes/No	