

GLOUCESTER CHARITIES TRUST

APPLICATION FOR GRANT

(to be completed by Care/Health Worker or other responsible body on behalf of the applicant)

A DETAILED COVERING LETTER FROM THE PROFESSIONAL MUST ACCOMPANY THIS APPLICATION

APPLICANT'S DETAILS			
APPLICANT'S FULL NAME: Mr/Mrs/Miss/Ms			AGE
ADDRESS			
Child's Name	Age	Child's Name	Age
OCCUPATION OF FATHER (OR GUARDIAN)		OCCUPATION OF MOTHER (OR GUARDIAN)	
ACCOMMODATION (Please circle) Owned / GCH / other Council / Housing Association / rented / other		CONDITION (Please circle) Good / fair / poor	
AMOUNT REQUESTED £		ITEM REQUIRED	
REASON FOR APPLICATION <i>(Please indicate general health, family needs, financial situation – please continue on separate sheet if necessary.)</i>			
Has the applicant received any other grants from Charities/Trusts or any direct payments from Gloucestershire County Council in the past 12 months? If 'Yes' please specify			
Has the applicant applied to any other source for these funds? If 'Yes' please specify, including the outcome of the request, if known.			

INCOME AND EXPENDITURE DETAILS			
Father's net monthly earnings (or guardian)		Rent/Mortgage per month	
Mother's net monthly earnings (or guardian)		Council tax per month	
		Water rates per month	
Child benefit per month		Food (approx) per month	
Family Tax Credit per month		Electricity/Gas per month	
Child Support per month		TV/Phone/mobile per month	
Pension per month		Insurance per month	
Other benefits (please specify) per month		Car/travel expenses per month	
		Court Orders per month	
		Credit/loans/HP per month	
Other income (please specify) per month		Other expenditure (please specify) per month	
TOTAL INCOME PER MONTH		TOTAL EXPENDITURE PER MONTH	
Applicant's Signature			
CONTACT INFORMATION OF CARE/HEALTH WORKER OR OTHER INDIVIDUAL SUBMITTING APPLICATION			
Name (please print)			
Signature			
Capacity (ie Care/Health Worker or Other)			
Organisation Name & Address			
Telephone Number			
Email Address			

In the event of a grant being given to whom should a cheque be made payable and to whom and what address should it be sent to?: ***(NB: Cheques cannot be made payable to the applicant)***

Completed application forms together with covering letter and supporting documents should be sent to:

Gloucester Charities Trust, Century House, 100 London Road, Gloucester GL1 3PL.
Telephone 01452 500429, email address info@gloschar.org.uk