

COMMON APPLICATION FORM

GUIDANCE NOTES

These notes are to help with an explanation as to what information is required on the Application Form.

Note 1. Details of contact

Please note that this section is only to be completed where the application form is not being filled in by the applicant, but by a third party, such as Social Services, SSAFA Forces Help, Age UK, Citizen's Advice Bureau etc.

Please date and sign the form.

Note 2. Applicant's personal information

Health problems or disabilities - this information is helpful in identifying sources of funding, as some organisations support people suffering from particular ailments.

Note 3. Spouse/Partner's Personal Information

Please supply this information even if the applicant's partner is now deceased.

This is helpful in identifying sources of funding since some organisations may support clients based upon their partner's details even if the partner is now deceased.

Note 4. Details of Grant Request

If the applicant is also applying to other organisations with respect to this grant/s or, for any Local Government Authority Benefit Entitlements, please indicate the names of the organisations applied to and the result of those applications (if known).

Indicate if the applicant has applied to this organisation for support in respect of this or any other grants on a previous occasion and, if so, indicate the approximate date of application/s and the outcomes.

Note 5. Applicant's Employment History

Please supply this information even if the applicant is now retired or even if the company is no longer in existence

Previous Employment: This is essential since there are many trade and professional benevolent funds that support people who have worked in certain fields.

Membership of a trade or professional body or trade union during that employment. This information is useful since many trade and professional bodies and trade unions support their members even if membership has now lapsed.

If the applicant had many different employments please give as many as possible.

Note 6. Spouse/Partner's Employment History

Please supply this information even if the applicant's partner is now retired or deceased

Give the same type of information for the applicant's partner as given for the applicant above. This is helpful in identifying sources of funding since some organisations may support clients upon their partner's details even if their partner is now deceased.

Note 7. Parents' employment history

Only complete this section in the case of an applicant who may qualify under parent/parent's service conditions i.e. having worked in the print industry and/or allied trades for a minimum of 5 years. Please supply this information even if the applicant's parent(s) is/are now retired or deceased.

Note 8. Details of children living at home

This information is required, in order that we may have an overall view of the household.

Note 9. Family Health Issues

This information can be helpful in identifying sources of funding since some organisations support clients based upon their family's health issues or disabilities.

Note 10. Details of people living in the applicant's home

This information is required, in order that we may have an overall view of the household. Please provide as much of the information as you can

For those listed who are employed, please indicate their weekly income and the amount they contribute each week to the household expenses, if any.

Note 11. Household Health Issues

This information can be helpful in identifying sources of funding.

Note 12. Details of Income

Please note that this information is needed for both the applicant and the applicant's spouse/partner and should be stated in terms of a net weekly figure if possible. However, monthly or annual figures are acceptable if these are all that is available. *Please indicate accordingly.*

Give the relevant information concerning all forms of income that are received by the applicant and the applicant's spouse/partner. In the case of "Any other income" please also indicate the nature of that income.

Please give details of any allowance/s which are included in the applicant's and/or the applicant's spouse/partner's State Retirement Pension/Pension Credit payments for "severe disability".

Note 13. Tax credits

Enter the amounts which are being received for "Disabled Persons Tax Credit, "Working Families Tax Credit" and "Child Tax Credit".

Note 14. Details of savings

Please note that this information is needed for both the applicant and the applicant's spouse/partner and should be stated in terms of the approximate amount of savings at the date of the application.

Give the relevant information concerning all forms of savings.

Note 15. Details of housing

Indicate the type of housing in which the applicant lives. Tick the appropriate box to indicate whether that housing is owned, either with or without a mortgage, whether it is rented from a Housing Association, Council, or privately, whether it is sheltered accommodation, a Residential Home or Nursing Home.

Please also give the approximate date that the applicant took up residence.

Note 16. Owned Homes

Only complete this section in the case of an applicant, who is living in accommodation, which is owned, by the applicant or the applicant's spouse/partner.

If applicable, state the amount of Support for Mortgage Interest received by the applicant, or the applicant's spouse/partner, in respect of the mortgage on their home in terms of a weekly amount.

Give the amount of mortgage that the applicant, or the applicant's spouse/partner pays in respect of their home. State the approximate amount paid in terms of a weekly amount.

Note 17. Rented Homes

Only complete this section in the case of an applicant who is living in rented accommodation.

Rent - state the total weekly amount that the applicant, or the applicant's spouse/partner pays i.e: over and above any Housing Benefit received.

Also state the amount of Housing Benefit, if any, received by the applicant, or the applicant's spouse/partner, in respect of their home in terms of a weekly amount.

Tick the relevant box/s to indicate if the rent paid includes payment for Water Rates and/or heating costs.

Note 18. Council Tax

Give the amount of Council Tax that the applicant, or the applicant's spouse/partner, pays in respect of their home. State the total amount paid, over and above any Council Tax benefit received, in terms of a weekly payment.

State the amount of Council Tax benefit received by the applicant, or the applicant's spouse/partner, in respect of their home in terms of a weekly amount.

Note 19. Other weekly expenditure

Please list any costs/expenses considered to be significantly above average and the reasons why.

Note 20. Family Financial Support

Please tick the appropriate boxes to indicate if family members have been asked/are able to contribute financially towards the applicant's grant request/s.

Note 21. Supporting Statement

Please provide any information which you feel should support your grant/s application.

Note 22. This form must be signed by the applicant and spouse/partner (if applicable)

The applicant should read the Declaration and Bye-Law 60 and when happy that all the information given is accurate, sign and date the form.

The form should also be signed by the applicant's spouse/partner to confirm that the information about them is accurate.

The form also needs to be signed by a witness (other than a family member).

Note 23. Benefit Payment by BACS

Please complete this section. If The Printing Charity considers the applicant is eligible for Regular Financial Assistance, funds are paid directly into the applicant's bank account.

This will ensure that the payment is not delayed, while we await this information.