

# Application for financial support

## 1. Applicant details (see note 1)

<b>Last name</b>		<b>First name</b>	<b>Title</b>
<b>Address</b>			
<b>Town</b>		<b>County</b>	<b>Postcode</b>
<b>Telephone</b>		<b>Mobile</b>	
<b>Email address</b>			
<b>National insurance no.</b>			<b>Nationality</b>
<b>Date of birth</b>	Day	Month	Year
<b>Marital status</b>			
	Single	Living with partner	Married / civil partnership
	Separated	Divorced	Widowed

If you are filling in this form on behalf of the applicant, please provide your details below (see note 1):

<b>Last name</b>		<b>First name</b>	<b>Title</b>
<b>Address</b>			
<b>Telephone</b>		<b>Mobile</b>	
<b>Email address</b>			
<b>Relationship to applicant</b>			
<b>Who should be the main contact for this application?</b>		Applicant	Both

## 2. Spouse / partner details (see note 2)

<b>Last name</b>		<b>First name</b>	<b>Title</b>
<b>Address</b>			
<b>Town</b>		<b>County</b>	<b>Postcode</b>
<b>Telephone</b>		<b>Mobile</b>	
<b>Email address</b>			
<b>Date of birth</b>	Day	Month	Year

### 3. Household members and dependents (see note 3)

Tell us who lives in your home and/or anyone that you are financially responsible for:

Name	Relation	Date of birth	In education	Employed	Unemployed	Weekly payment to household
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**Do you, your spouse/partner, household members or dependents have any significant health issues or disabilities?**

If so, please provide details:

### 4. Grant request (see note 4)

How did you hear about the Printing Charity?

Have you applied to us before? Yes  No

Which type of grant(s) are you applying for? Financial support  One-off grant

**One-off grant only** - please explain what you need it for:

What is the total cost? £

How much are you asking for? £

Have you applied to anyone else e.g. other charities, trusts, local authority? Yes  No

If yes, please provide details below and give the outcome (if known):

Have you checked your benefit entitlements? Agencies that may assist include:

your local authority, DWP, Citizens Advice, Age UK and Turn2Us Yes  No

If yes, please provide details below:

## 5. Employment history (see note 5)

### Give details of your current or previous employment, even if now retired

Employer	Job description	Dates	Union
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### Give details of your spouse's/partner's current or previous employment, even if now retired or deceased

Employer	Job description	Dates	Union
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### Give details of your parents' current or previous employment, even if now retired or deceased

Employer	Job description	Dates	Union
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### Give details of your children's current or previous employment

Employer	Job description	Dates	Union
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## 6. Housing (see note 6)

### Tick the type of property you currently occupy and advise the date you moved in

Owned – no mortgage

Owned – with mortgage                      Mortgage outstanding    £

Shared Ownership                              Percentage owned            %

Mortgage outstanding    £

Rented - council

Rented - private

Rented - housing association

Sheltered accommodation

Other

Date moved in

### Amount of benefit received £

Housing Benefit                              £

Support for mortgage interest    £

Council tax reduction                      £

## 7. Housing history (see note 7)

### Give details of your previous addresses over the past 3 years

Address				
Postcode	Dates	Did you own the property?	Y	N
Address				
Postcode	Dates	Did you own the property?	Y	N
Address				
Postcode	Dates	Did you own the property?	Y	N

## 8. Income (see note 8) - Indicate the net WEEKLY income after tax, etc.

	Applicant £	Spouse / partner £
Wage / salary (after tax)		
Universal credit		
Working tax credit		
Income support		
Job seekers allowance		
Employment and support allowance / incapacity benefit		
State pension		
Workplace / private pension		
Pension credit		
Statutory sick pay		
Statutory maternity/paternity or shared parental pay		
Maternity allowance		
Other household income contributions		
Bereavement allowance		
Child tax credit		
Child benefit		
Child maintenance received		
Other charitable support		
<b>Gross income</b> .....		
Personal independence payment / disability living allowance		
Disability premiums / benefits		
Attendance allowance		
Carer's allowance		
<b>Total disability income</b> .....		

**9. Household expenditure (see note 9) - Provide figures in terms of WEEKLY amount**

	£	Arrears £
Rent (less any housing benefit)		
Mortgage(s) (less support for mortgage interest)		
Council tax (less council tax reduction)		
Ground rent / service charge		
Buildings / contents insurance		
Water rates		
Gas / electricity		
Other fuels e.g. LPG, oil, coal		
<b>Total</b> .....		
Childcare costs e.g. childminder, nursery		
Child maintenance paid		
Maintenance for ex-partner / spouse		
Care costs		
<b>Total</b> .....		
Food		
Clothing		
Mobile phone		
Telephone / TV / broadband		
Household goods e.g. furniture, appliances		
Social participation		
Car costs (including finance)		
Public transport / taxis		
Personal goods and services e.g. toiletries, prescriptions, dentist, glasses		
Life assurance / other insurance		
Any other above-average costs / expenses		
<b>Total</b> .....		

**10. Capital / savings (see note 10) - Give the current total**  
Do not leave any boxes blank, if no savings exist please enter '0'

	You £	Spouse / partner £
Bank accounts		
Building societies		
National savings accounts		
Investments (ISAs, bonds etc.)		
Premium bonds		
Stocks and shares		
Value of other property, if applicable		
Redundancy pay / compensation		
<b>Total .....</b>		

**Disposal of assets - Have you disposed of any assets within the last 5 years?**

**e.g. sold or gifted a property or shares**

Yes                      No

If yes, please give details

**11. Debts (see note 11) -**  
e.g .mortgage, bank loans, credit cards, hire purchase, all other debts or loans

Name of creditor	Purpose	Monthly £	Balance Owed £
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**What action or advice have you taken about your debts?**

## 12. Supporting statement (Optional) (see note 12)

**Include details of family caring responsibilities, voluntary work, trade union service and any other work or activity, paid or voluntary, that you feel should support your application.**

## 13. Declaration (see note 13)

By signing this form, I declare that:

All the information provided in the application form is true and correct. Full disclosure of all income, capital, savings and investments has been made and I will inform The Printing Charity of any change in circumstances that I may have during the application process.

I give permission for The Printing Charity to contact other charities and third parties who may be able to offer assistance.

I give permission for The Printing Charity to make checks to verify the information I have provided. I understand that this may include The Printing Charity contacting other charities and third parties and accessing information in the public domain and searching via social media platforms.

I understand that any false or misleading information can result in the withdrawal or repayment of any grant that may be awarded.

I have read The Printing Charity's Privacy Notice for Beneficiaries and I consent to the collection, use and disclosure of my personal information, including my health information, as described to me in the Privacy Notice for Beneficiaries. I understand that if I have any questions about the Privacy Notice for Beneficiaries or the charity's privacy practices, including any requests to exercise my legal rights under the Data Protection Act 2018, then I can contact the Head of Welfare & Wellbeing by email at: [support@theprintingcharity.org.uk](mailto:support@theprintingcharity.org.uk) or by post at: First Floor, Underwood House, 235 Three Bridges Road, Crawley, West Sussex, RH10 1LS.

**Signed (you)**

**Date**

**Signed (your spouse /  
partner)**

**Date**

**14. Supporting documents (see note 14) - Please  
enclose the following documents with your application:**

**DWP and universal credit correspondence**  
**Council tax**  
**Housing benefit payslips for the last 3 months**  
**Personal and state pension**  
**Any other source of income**  
**Copies of your last 3 months' bank statements**

**Please return the completed form to:**

The Printing Charity  
First Floor, Underwood House, 235 Three  
Bridges Road, Crawley, West Sussex, RH10 1LS  
**Telephone:** 01293 542820  
**Email:** [support@theprintingcharity.org.uk](mailto:support@theprintingcharity.org.uk)  
**Website:** [www.theprintingcharity.org.uk](http://www.theprintingcharity.org.uk)