**WARWICK RELIEF IN NEED CHARITY**

**GRANT APPLICATION FORM**

**For Individuals only (must be Warwick residents)**

| **REFERRING AGENCY DETAILS**  *This form must be completed in conjunction with the referring agency (eg CAB, Social Worker, School Head/Deputy/Key Lead, Religious leader, GP etc). Applications from individuals without a referral will not be considered. Please also provide a letter in support of the application, giving further details of the applicant, their circumstances, and the reason for the application.*  **If you do not have anyone who can support your application, please email**  [**choughton@moore-tibbits.co.uk**](mailto:choughton@moore-tibbits.co.uk) **for help and advice.** | | |
| --- | --- | --- |
| Agency Name |  | |
| Agency Contact |  | |
| Agency Role/Job |  | |
| Address |  | |
| Email |  | |
| Phone number |  | |
| **DETAILS OF INDIVIDUAL REQUIRING GRANT** | | |
| Name |  | |
| Address *(see note 1)* |  | |
| Telephone No. |  | |
| Email Address |  | |
| How many adults are living at address/Family background |  | |
| Age and date of birth of applicant |  | |
| No of children and ages |  | |
| Nature of sickness/disability/ need |  | |
| What state benefits does the individual receive? |  | |
| What evidence is there of financial hardship?  *(see note 2)*  *(Please explain their financial situation and complete a ‘Financial Summary document’ along with this application)* |  | |
| **DETAILS OF FINANCIAL NEED** | | |
| Purpose of grant requested  *(see note 3)*  *(Enclose further information if necessary)* |  | |
| Budget Breakdown  *(Please itemize what the money will be spent on specifically and attach 1 quote for each item from a Warwick based company)* |  | |
| Please include details of other national and local charities applied to (with amounts, results or expected date of response). |  | |
| Total cost of request | £ |  |
| Less: Funds raised so far | £ |
| Less: Funds expected to be raised | £ |
| = Grant requested | £ |
| Has applicant applied previously for a grant from this charity?  If yes, please provide amount/date/details | Yes/No | |
| Have you completed the financial summary? | Yes/No | |
| Have you attached quotes for all any items requested?  *Please note additional quotes may be requested* | Yes/No | |
| Other comments |  | |
| Signed by (Agency): |  | |
| Job Role: |  | |
| Date: |  | |
| Signed by (Individual): |  | |
| Date: |  | |

**Submission Checklist**

| **Requirement** | **Yes/No** |
| --- | --- |
| Agency Details Completed |  |
| Form Fully Completed |  |
| Financial Summary Document completed and attached |  |
| Quote from Warwick Based company attached |  |
| Signed by Agency |  |
| Signed by Individual |  |

**Confirmation and Authorisation**

*By submitting this form you are confirming that you have written agreement and permission of any individuals identified in your application to pass their personal information to Warwick Relief in Need, and authorise that the Trust can process their personal data in accordance with all current data protection legislation.*

*We will use this information only for the purposes of assessing your application, managing and administering any grant awarded. The information may be stored in both hard copy and electronic form, and it may be distributed to our Trustees and possibly our professional advisers via electronic, printed, or verbal communications.*

*We wish to take good care of personal data, and only process personal data necessary for our purposes.*

Return the signed form to: **Christopher Houghton, Clerk to the Trustees, 3rd Floor, Westgate House, Market Street, Warwick, CV34 4DH** Or email to [**choughton@moore-tibbits.co.uk**](mailto:choughton@moore-tibbits.co.uk)

Notes

1. Grant applications can only be awarded for the benefit of the inhabitants of the Old Borough of Warwick. As a guide this is the post code area CV34, although there are some variances. Contact the Clerk for further details.
2. Evidence of need. Trustees may request further information to help them consider the application. The main one is likely to be to identify whether there is a real financial need. Accurate completion of the ‘Financial Summary’ document will help with this assessment.
3. Please give the full background as to why this individual requires financial support. There are certain limitations on the type and nature of grants that can be given and we do not give money direct to individuals. Please contact the Clerk if you require further details or clarification.

If the Trustees consider that another charity in Warwick is more appropriate they will suggest that you apply directly to that charity.

1. If the grant is awarded and other grants, in total, exceed the required cost then the Trust will expect any surplus funds to be repaid.