Salisbury City Almshouse and Welfare Charities



Clerk to the Trustees Trinity Hospital Trinity Street Salisbury SP1 2BD Telephone: 01722 325640 E-mail: clerk@salisburyalmshouses.co.uk www.salisburyalmshouses.co.uk

Trinity Hospital

GUIDANCE ON THE COMPLETION OF EDUCATIONAL GRANT APPLICATIONS

Salisbury City Almshouse Educational and Apprenticing Charity is a small fund which can make grants to young people (up to 25 years old) who are resident in the Salisbury area and in need of financial assistance towards an educational activity. Priority is always given to individuals where either they, or their parents/guardians, are in receipt of benefits and applicants who demonstrate significant financial need. 'Education' is considered in the broadest sense and can include activities such as school trips, play schemes, obtaining academic, trade and professional qualifications, as well as adventure training, expeditions to and teaching in third world countries. The development of independence and self-reliance, initiative and resourcefulness often forms an important part of educational activities.

What can be funded?

- a. As well as courses and trips, funds can be granted towards course fees, essential books, specialised equipment and tools required to undertake a course or trip etc. Regular payments towards fees or expenses are only made in exceptional circumstances.
- b. Grants are generally not paid until (where appropriate) we receive confirmation from the applicant's sponsor that the balance required has been raised in full.
- c. Postgraduate studies cannot be funded.
- d. Daily subsistence expenses (for example at university) are not funded.

Completing the Application Form

Part 1 - Personal Details

Please check the Personal Details section is completed correctly and in full. The applicant's NI number must be provided and the form signed by them.

Part 2 - Reasons for Undertaking the Activity

Please explain in detail the reasons for undertaking this activity and the benefit you hope to gain for the future by doing so. This is of the utmost importance to the Trustees when considering applications.

Part 3 - Sponsor's Recommendation

The sponsor could be a teacher, tutor or activity organiser and must have sufficient knowledge of your capabilities and background to assess if you will benefit from taking part. Please ask your sponsor to specify how he/she considers you will gain by taking part in the activity.

Part 4 - Funding

Please list each element of cost and how the total amount of the activity will be funded. It is important that all other grants applied for are detailed by organisation and the amount requested from each. For applicants who are not self-supporting or financially independent, the Income and Expenditure form should be completed in full detailing 'household' income.

Part 5 - Family Details

Please list the other members of the applicant's household.

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Part 6 - Financial Details

We need to have the fullest possible information about the applicant's parental/household's finances, weekly income and expenditure since our resources are limited and we would like to ensure that priority is given to those most in need.

- a. This should be completed <u>in full</u> by the applicant or their parent/guardian in the presence of the sponsor if possible. Ensure the figures are correct and that the totals are accurate. Please state if an expense item is payable monthly or four-weekly rather than weekly. All benefits received must be itemised.
- b. Ensure the totals of weekly income and expenditure fully reflect the household's financial circumstances realistically and sensibly.
- c. If it appears that expenditure exceeds income, this should be noted in Part 3 with an explanation of what is being done to correct this.
- d. If it appears that income easily covers expenditure, please explain in Part 3 why they are in need of a grant.
- e. Debts should be itemised to show:
 - The original amount borrowed
 - From whom it was borrowed
 - · What it was for/why it was borrowed
 - The amount outstanding
 - The weekly repayments

General

The Trustees meet to consider all applications on a monthly basis. However, if an application requires further clarification, is in an unacceptable form, illegible, or is considered to be of a low priority we will contact the sponsor prior to consideration. All Grants from the Charities are discretionary and subject to level of funds available. There is no automatic entitlement to a grant and all cases are assessed on an individual basis. The Trustees' decision is final. No correspondence will be entered into with unsuccessful applicants.

By signing the form, the applicant confirms that the information provided is complete and correct and that further information will be provided if requested. By signing the form, the sponsor confirms that, to the best of their knowledge, all the information provided is true and accurate, and that they are responsible for ensuring that the grant monies will only be used for the intended purpose.

Data Protection

The application and any further information provided will be kept in our filing system (in paper and/or electronic form). Details of applications and any subsequent information will be recorded on our computer system, together with details of any subsequent correspondence and/or grants awarded. We may disclose personal information as necessary to third parties who supply goods or services to applicants as part of the grant making process or similar. We may also disclose information to third parties where necessary to comply with applicable laws and regulations and/or for the purposes of obtaining professional advice (e.g. legal advice).

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(This cannot be an individual)

SALISBURY CITY ALMSHOUSE AND WELFARE CHARITIES APPLICATION FOR AN EDUCATIONAL GRANT

The Guidance Notes <u>must be read</u> prior to completing this form. Please use BLOCK CAPITALS

Post to: Salisbury City Almshouse and Welfare Charities, Trinity Hospital, Trinity Street, Salisbury SP1 2BD

Final to: Clark@salisbury.almshouses co.uk (the form must be signed and all sections completed)

Email to: <u>cierk@sailsburyalmsnouses.co.uk</u> (the form must be signed and all	
PART 1 - APPLICATION	For Office Use Only Received:
Full name of Applicant	Previous Correspondence attached:
Applicant's address	Grants Card Attached YES/NO
Applicant a didicios	Grants Committee Recommendation:
Post Code	
Telephone Number	Grant Approved
Present Educational/Trade Qualifications	Date Paid:
riesent Luddational/Trade Qualifications	
Name and Address of School / College / or Employer	
Grant is required for	
Applicant's Signature (if over 16)	Date
PART 2 - REASONS FOR UNDERTAKING THE ACTIVITY / ASSISTANCE	REQUIRING FINANCIAL
Please enclose details of why you/the Applicant wishes to underta	ake this activity or requires the
items, how they will benefit from the experience and how it will he	lp with future plans. You should
attach any supporting literature concerning the activity / course / e	expedition / etc which clearly
shows the costs involved and the organisation providing the activi	itv.
Total cost £	· — — —
PART 3 - SPONSOR'S JUSTIFICATION, RECOMMENDATION Please attach a letter from your sponsor on their organisation's hea	
relevant background history on your situation, the reasons why you	
and why financial assistance is needed. The sponsor should also	explain how the quality of the
applicant's life would be significantly improved if a grant were to be	provided.
Sponsor's recommendations for grant : £	
Organisation Name & Address:	
	o Number:

To whom grant cheque payable:

PART 4 - FUNDING

	Trip / Course / Apprenticeship / Equipment / Tools / Text Books on and documentation where appropriate or continue on Page 4 if necessary)	/ Expe	dition /	etc.
		£		
		£	•	
			•	
		£	•	
		£ 		
	TOTAL	£		
	TOTAL		•	
Amounts (if any) to be contri	buted towards the costs by:			
Parent(s) / Guardian(s)		£		
Applicant out of income or savi	ngs	£		
Applicant from fund-raising acti (Please give details of what you	vities, eg, part-time work, sponsored events, etc u will be doing to raise money)	£		
Details of other grants applied		t		Confirmed ?
		£	•	
		£	•	Y/N
		£	•	Y/N
Details of other sources of fund	ing:			
	9.	£		
		£	•	
		۷	•	
	Total (equals the total cost of the course/trip as above)	£		
	· ,			
	PART 5 - FAMILY DETAILS			
Parent 1 Name	Occupation	DoB		
Parent 2 Name	Occupation	DoB		
Siblings:	1	DoB		
(& dependants living at home)	2	DoB .		
,	3			
	4			

PART 6 - INCOME AND EXPENDITURE, SAVINGS & OUTSTANDING DEBTS/ARREARS/FINES **HOUSEHOLD INCOME** (per week) Wages/Salary per week £ State Retirement Pension per week Pension from previous employment £ per week Benefits: **Universal Credit** £ per week Job Seekers Allowance (JSA) £ per week Do You £ **Employment Support Allowance (ESA)** per week Receive Housing £ Income Support per week Benefit? £ Working Tax Credits per week **FULL** Child Tax Credits £ per week **PART** Child Benefit £ per week NONE £ Disability Living Allowance/PIP Payments per week £ Attendance Allowance per week (Please circle £ Carer's Allowance per week which applies) Incapacity Benefit £ per week Child Maintenance Payments £ per week Please give details of any other income and/or benefits received: £ 1. per week 2. £ per week **Total Weekly Income:** £ per week Total Amount in Savings (Building Societies, Bank, Post Office etc) **HOUSEHOLD EXPENDITURE** (per week) Rent / Mortgage (delete as appropriate) per week Council Tax per week Water Rates £ per week Energy costs (Gas, Electricity, Oil, Coal etc) £ per week Food and Household Expenses (incl pet costs) £ per week Travel Costs: Car (include insurance, maintenance and fuel) per week Public Transport: To work/shopping/other per week To school per week (Does this include Sky or similar? YES/NO)£ per week Mobile Phones£ per week Home Phone (Does this include Broadband? YES/NO)£ per week Insurances: {Household per week {Life per week Hire Purchase (give details) per week £ Mail Order/Catalogues/Clubs (give details) per week Other Expenditure - give details: per week £ per week **Details of Debts/Arrears/Fines:** Original Balance Weekly Owed To Reason money borrowed Debt £ Payment £ £

Please ensure that all parts have been completed in full, the form is signed and you have provided supporting information as required.

ADDITIONAL BACKGROUND / SUPPORTING INFORMATION