Salisbury City Almshouse and Welfare Charities



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Trinity Hospital

GUIDANCE FOR GRANT SPONSORS ON THE COMPLETION OF WELFARE GRANT APPLICATIONS

Welfare (Relief in Need) Grants can be made to needy residents of the Salisbury area who are suffering temporary financial hardship to help them overcome their present difficulties. Grants are not given to top-up income, repay debts or to reimburse people for purchases already made. Repeat grants are discouraged. Our Charity Commission Scheme does not permit grants to be made in cases where there is an entitlement to a statutory benefit or allowance, although it does allow these entitlements to be augmented in special circumstances. It is important that sponsors check that applicants are in full receipt of <u>all</u> their statutory entitlements and, where this is not the case, to indicate in Part 2 of the application form what action has been taken to correct any shortfall.

Applications can be considered for household items including kitchen appliances, furniture, clothing and school uniform, beds, bedding and carpets, as well as specialist disability/mobility aids and equipment, hospital visits, removal costs and funeral expenses. It is recommended that quotations for items are provided wherever possible, but it should be noted we cannot reimburse an applicant for something that has already been ordered. The Charities encourage cost effective purchases (eg. a reconditioned washing machine with a guarantee from a reputable supplier. The Charities will require a pro forma receipt to be signed by successful applicants which must be returned, together with receipts for the item/s purchased. Failure to provide these documents may result in future applications being rejected.

Part 1 - Personal Details

- a. Please check this section is completed correctly and in full in the presence of the applicant. The applicant's NI number must be provided and the form signed by them.
- b. Applicant's contribution Applicants may be able to make a contribution towards the total cost of the item required.
- c. An interest free loan may only be considered in exceptional circumstances. If a loan is requested, a suitable guarantor will need to provide a letter, on headed paper, guaranteeing that they will repay the loan in full in the event of non-payment by the applicant.

Part 2 - Sponsor's Justification and Recommendation

- a. This is the most important part of any application as it identifies the needs of the applicants and how best they can be helped to overcome their present difficulties.
- b. The Justification should be comprehensive and provide a good amount of background information on the applicant (and their family if appropriate) and how they have arrived at their current difficulties. This will enable the Trustees to make an informed decision. The sponsor should state the reasons why the assistance or particular item is needed and how the quality of the applicant's life would be significantly improved if it were to be provided. Information should also be given on what additional support the applicant is receiving and from whom (such as Citizens' Advice, the Step Change Debt Charity, a money management service, medical or social workers etc).
- c. The recommendation for a grant should provide the best way of helping the applicants over a difficult period and enable them to cope better with their circumstances.
- d. Please give details of any other sources that have been approached for financial help, including the amounts requested and what has already been awarded. This can be useful if a high value item is required as we may be able to provide what is needed jointly with other funders.

Part 2 - Authorisation and Payment Details

All applications must be signed by the sponsor and countersigned by a senior colleague, giving full details of the sponsoring organisation to which any payment should be made.

NOTE: CHEQUES CANNOT BE MADE PAYABLE TO THE APPLICANT OR ANY OTHER INDIVIDUAL.

Part 3 - Weekly Income and Expenditure/Savings and Outstanding Debts/Arrears

We need to have the fullest possible information about the applicant/s and their household finances, weekly income and expenditure. Our resources are limited and we can only provide help to those most in need.

- This should be completed in full by the applicant in the presence of the sponsor if possible. Ensure the a. 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.
- Ensure the totals of weekly income and expenditure fully reflect the applicant's financial circumstances b. realistically and sensibly.
- If it appears the expenditure exceeds their income, this should be noted in Part 2 with an explanation of what C. is being done to correct this.
- d. If it appears that an applicant's income easily covers their expenditure, please explain in Part 2 why they are in need of a grant or an interest free repayable loan.
- 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 Welfare 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).

SALISBURY CITY ALMSHOUSE AND WELFARE CHARITIES APPLICATION FOR A WELFARE 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

Email to: clerk@salisburyalmshouses.co.uk (forms must be signed) For Office Use Only **PART 1 – APPLICANT DETAILS** Date received: Previous correspondence: Full name of Applicant Date of Birth/...../ Previous grant/s: Spouse/Partner Date of Birth/...../ Grants Committee recommendation: Applicant's address Post Code Date approved: Telephone: Date paid: Receipts received: Children/Dependents: <u>Gen</u>der Forename and Surname Date of Birth Forename and Surname Gender Date of Birth What is the grant required for? Total cost £ LESS: Applicant's contribution (if any) £ Amount Requested £ (Two quotations must be provided for any new items being requested) Applicant's signature: Date: Spouse/Partner's signature: Date: General Data Protection Regulations (GDPR) The personal data collected from this application form is necessary in order to process and review your grant application, and in order to contact applicants' sponsors about information relating to the request for a grant. The Charities will not sell or otherwise pass personal data to third parties (except as may be required by law or regulation, or directly in connection with the application or grant). The Charities do not enter into correspondence with applicants. For further information, please contact the Charities (01722 325640, clerk@salisburyalmshouses.co.uk). PART 2 - SPONSOR'S JUSTIFICATION, RECOMMENDATION & AUTHORISATION Please attach a letter from your sponsor on their organisation's headed paper, which provides relevant background history on your situation, the reasons why you are experiencing difficulties and why financial assistance or a particular item 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. Details of other grants applied for and/or received for should also be given. Sponsor's recommendation for grant £ and/or loan £ Date Sponsor's signature Print Name Countersignature of Manager Print Name Organisation Name and Full Address:

To whom grant cheques should be payable (NOTE: Payments will not be made directly to individuals)

PART 3 - INCOME AND EXPENDITURE, SAVINGS & OUTSTANDING DEBTS/ARREARS/FINES

		,			
ALL WEEKL	<u>Y</u> HOUSEHOLD INCOME (including	g that of your spouse or partner)			
Wages/Salary			£	. per we	eek
State Retirement Pension (including Pension Credits)			£	. per we	eek
Pension from previous employment			£	. per week	
Universal Credit (including any Housing payments)			£	. per week	
Job Seekers Allowance (JSA)			£	. per week	
Employment Support Allowance (ESA)			£	. per week	
Income Support			£	. per week	
Working Tax Credits			£	. per week	
Child Tax Credits			£	. per week	
Child Benefit			£	. per week	
Disability Living Allowance/PIP - name of who receives this			£	. per week	
Attendance Allowance				. per week	
Carer's Allowance			£	. per week	
Incapacity Benefit			£	. per we	eek
Child Mainte	nance Payments (CMS/CSA, private	arrangements etc)	£	. per we	eek
	ome and/or benefits received:				
1. 2.			£	. per we	
3.			£	. per we	
		Total <u>Weekly</u> Income:	£	. per we	<u>eek</u>
Total Amount of Savings (Building Society, Bank, Post Office, ISA etc)					
		- , ,			
	<u>Y</u> HOUSEHOLD EXPENDITURE Mortgage (delete as appropriate)		£	. per we	eek
Council Tax			£	. per week	
Water rates			£	. per week	
Energy costs (Gas, Electricity, Oil, Coal etc)			£	. per week	
Food and household expenses (include pet costs)				. per week	
Car costs (include insurance, maintenance and fuel)			£	. per week	
Public transport: To work/shopping/other			£	. per week	
To school			£	. per we	
TV - Licence only			£	. per we	
TV - Other subscription services eg Sky, Virgin, Amazon, Netflix etc			£	. per week	
Mobile phones			£	. per week	
Home phone - Does this include Broadband? YES/NO			£	. per week	
Household and life insurances (include appliance insurances)			£	. per week	
Hire purchase agreements (state company)			£	. per week	
Mail order catalogues, club books, eg Studio etc				. per week	
· · · · · · · · · · · · · · · · · · ·			£		
	•	a separate sheet)	£	·	
outor regular	woonly experience (give details off	Total Weekly Expenditure		-	
Debts, loans	s, arrears, Court fines etc:	rotal <u>Weekly</u> Expeliature	<u>~</u>	<u>. perw</u>	<u> </u>
		Why was the money borrowed?		Balance	Wkly Pr
Original Debt £	To whom is this owed?	viiiy was the mensy software.		£	£
	To whom is this owed?	viny was the mency perioded.		£	ž.

Please continue on separate sheet if necessary