

Please contact

Secretary

Cottenham Charities

Tel: 01954 250082

info@cottenhamcharities.co.uk



COTTENHAM CHARITIES

APPLICATION FOR A GRANT:

The information contained in this application form will be provided to the charity in confidence and will not be disclosed to anyone other than the Secretary and Trustees.

Applicants are advised that failure to disclose any relevant information may prejudice their application. Misleading or inaccurate information may lead to your application being refused.

You

Your Spouse/Partner

	You	Your Spouse/Partner
SURNAME		
FIRST NAME(S):		
DATE OF BIRTH		
OCCUPATION		
ADDRESS		
POSTCODE		
EMAIL ADDRESS		
TELEPHONE NUMBER		
NAME & AGE OF CHILDREN		
How long have you lived at the above address? Number of years		
Do you live alone? (If 'NO' please give brief details)		

I receive the following benefit(s) - Please tick

Pension Credit Pension Savings Credit
Income Support Incapacity Benefit (with no other income)
Employment and Support Allowance:- Work related or Support
Housing Allowance/Benefit Council Tax Support (not 25% discount)
Universal Credit

PLEASE COMPLETE DETAILS OVERLEAF

REASON FOR APPLICATION – Please give details of why you need financial assistance and of any disabilities you may have

The charity prefers to pay directly to the providers of goods so please list what you would like to purchase and the estimated price. We often recommend the British Heart Foundation for electrical goods and Emmaus or Cambridge Re-use for furniture but other sources will be considered.

PLEASE LIST ITEMS YOU REQUIRE WITH AN ESTIMATE OF COST

Signed _____

Date _____

NB. A Trustee will visit you after you return this form to discuss your needs and assess your financial situation.