

HIGHWORTH UNITED CHARITIES
RELIEF OF NEED FUND- REGISTERED CHARITY NO. 200777

The Fund makes grants for items or services that assist HIGHWORTH AND SOUTH MARSTON residents who are in genuine need. The Money available is limited and therefore, assistance given cannot be repeated later.

APPLICATION

This Form may be completed by either the applicant or by a supporter.
PLEASE COMPLETE THE INFORMATION ON BOTH SIDES OF THIS FORM

DETAILS OF APPLICANT

Mr/Mrs/Ms/Miss/Other.....

Surname..... Forenames.....

Age.....

APPLICANT'S SPOUSE/PARTNER (IF ANY)

Mr/Mrs/Ms/Miss/Other.....

Surname..... Forenames.....

Age.....

Number of dependants.....

Full Address.....

.....Post Code.....

Email Address.....

Please explain why the assistance is needed. **PLEASE PROVIDE WRITTEN PROOF.** You may continue on a separate sheet if necessary.

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How much money is needed

£.....

WEEKLY/MONTHLY HOUSEHOLD INCOME- Please give details for self and spouse/partner, enclosing copies of evidence, relevant letters or other information. Missing information and evidence will cause a delay in your application being considered.

Weekly/Monthly Income	<u>Applicant £</u>	<u>Spouse/Partner</u>	<u>Evidence enclosed.</u> <u>(Please tick)</u>
Earnings			☐
Benefits			☐
Credits			☐
Pension			☐
Child and other allowances			☐
Other Income- Please specify			☐

WEEKLY/MONTHLY HOUSEHOLD PAYMENTS, including arrears please enclose proof such as letters, bills and arrears statements. Missing information and evidence will cause a delay in your application being considered.

Weekly/Monthly Household expenditure	<u>Amount £</u>	<u>Evidence Enclosed</u> <u>(Please tick)</u>
Rent/Mortgage		☐
Council Tax		☐
Electricity		☐
Gas		☐
Water		☐
Household food bill		☐
Phone bill		☐
Other expenditure- please provide details		☐

DECLARATION

I declare that the figures stated for income and payments are a true record.

Signature of
applicant.....Date.....

Supporter (if any) Name and
Address.....

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Signature.....Date.....

Thank you. This form should now be returned in an envelope marked HIGHWORTH UNITED CHARITIES to the Highworth Council Office or Email to HUcharity1944@gmail.com. Please remember your evidence.