

Wellbeing Fund Application

Name of person with a disability		Date of birth	
Address			
Postcode			
Tel (home)		Tel (mobile)	
Is this	<input type="checkbox"/> a hostel ?	<input type="checkbox"/> Rented?	<input type="checkbox"/> your own or parents' home? <input type="checkbox"/> Residential home?
Name of spouse/partner/parent			
Total number in the household...	Adults?	Children?	Ages of children
How did you hear about our Wellbeing Fund?			
Nature of your disability?			
How will you use this grant?			
Total cost £	Amount of grant requested £		
Have you applied to Gloucestershire Local Reform Fund or any other charities?			

Income of the household per week

Bring Home Pay (applicant)	
(spouse/partner/parent(s))	
State Pension	
Private/Occupational Pension	
Pension, Working or Child Tax Credits	
Child Benefit	
Jobseekers Allowance	
Employment Support Allowance	
Attendance Allowance (HR/LR)	
DLA/PIP (care - HR/MR/LR)	
DLA/PIP (mobility - HR/LR/vehicle)	
Carer's Allowance	
Family &/or lodger contributions	
Other (please specify)	
Total	£

Outgoings of the household per week

Mortgage	
Rent (after Housing Benefit, if received)	
Council Tax (after Council Tax Support)	
Gas & Electricity	
Water	
Housekeeping	
'Help at home' costs (cleaner/gardener)	
TV Licence/rental/Sky (incl. insurance)	
Telephone (landline/mobile) & broadband	
Insurance (house, life, car)	
Car / travel / taxis	
Mobility vehicle costs	
Clubs / loans	
Other (please specify)	
Total	£

Savings of all adult members of the household

(Please include total of bank and building society accounts and value of premium bonds, stocks and shares, ISAs etc.)

Applicant £	Spouse/Partner £	Parent(s) £
Do you (or anyone in your household own property other than the house in which you live? Yes / No		

Barnwood Trust works to promote the wellbeing of individuals within Gloucestershire. In order to do this, it is helpful to be able to share your information within the Trust. All the information you provide will be used and stored in accordance with the Data Protection Act 1998. Do you consent to your personal but not financial information, recorded as part of the grants application process, being shared with others within Barnwood Trust? **Yes / No**

Statement I confirm that the details above give a true picture of my circumstances. I give my consent to link this application to any previous applications to Barnwood House Trust, to the retention of this information under the Data Protection Act, to disclosure of information relevant to this application by my doctor and/or other appropriate person or authority and to the Trust seeking further information from these sources, if needed.

Signature of applicant

Date

Please note that the Trust does not make grants for goods and services already purchased or ordered prior to making an application. You should not order goods or services in the hope of a grant as you will be liable for payment yourself.

Barnwood Trust

Ullenwood Manor Farm, Ullenwood, Cheltenham, Gloucestershire GL53 9QT

☎ 01452 611 292 ✉ grants@barnwoodtrust.org

barnwoodtrust.org

Registered charity number 1162855



This section must be completed by the appropriate professional or agency making the referral, who knows about you and your disability and can comment on both your circumstances and this application.

Describe the applicant's disability (Please give clinical diagnosis where possible)	
How long have you/your organisation known the applicant?	When did you last see the applicant?
Are there any other charity applications made or pending for this request?	Yes / No
If yes please give details	
Have you made the applicant aware that we will make a home visit?	
Would it be in the applicant's best interests for the home visitor to contact you before the visit?	
We would like to contact successful recipients after the grant is awarded to follow up the effect this grant has had on their lives. Please tick box if the applicant <u>does not</u> wish to be contacted. <input type="checkbox"/> (This will not affect any grant award).	

Background/endorsement of this application

The **referrer** must complete this section, explaining how the award of a grant will contribute to the wellbeing of the applicant

Name of referrer	Job title
Organisation	
Postal address	
	Postcode
E-mail address	Tel (work) Tel (mob)

Signature of referrer

Date

Please return this completed form to: **The Grants Team, Barnwood Trust, Ullenwood Manor Farm, Ullenwood, Cheltenham GL53 9QT Tel: 01452 611292**

All personal information held by Barnwood Trust is stored and processed in accordance with the Principles of Data Protection to meet operational and charitable goals.

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