**Opportunities Award Application Form**

Please read Guidance Notes before completing form.

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| Name of person with disability: | Date of birth:  |
| Current Address:  |  |  |  |
|  |  | Postcode: |  |
| Telephone number: Mobile: |  |  |
| Email address: |  |  |
| Is this:  |  Rented? | Your own/parents’ home?  | Residential home? | A hostel? |
| Total number in the household: Adults? Children?  |  Ages of children? |
| Nature of your disability? |
| Have you applied to any other charities? |
| **Income of the household per week** |  | **Outgoings of the household per week** |
| Bring Home Pay *(applicant)* | £ |  | Mortgage | £ |
|  *(spouse/partner/parent(s))* | £ |  | Rent *(after Housing Benefit, if received)* | £ |
| State/Private/Occupational Pension  | £ |  | Council Tax *(after Council Tax Support)* | £ |
| Pension, Working or Child Tax Credits | £ |  | Gas, Electric & Water | £ |
| Universal Credit  | £ |  | Housekeeping *(e.g. food, supermarket shop)*  | £ |
| Jobseekers Allowance | £ |  | Help at Home *(e.g. cleaner/gardener)* | £ |
| ESA – Working Group | £ |  | TV Licence/Rental/Sky  | £ |
| ESA – Support Group | £ |  | Landline, Mobile & Broadband | £ |
| DLA/PIP | £ |  | Car *(e.g. fuel, insurance, tax etc.)* | £ |
| Attendance Allowance | £ |  | Other Insurances *(e.g. life, household etc. )*  | £ |
| Carer’s Allowance  | £ |  | Public Transport/Taxi  | £ |
| Child Benefit | £ |  | Loans/Debt Repayments | £ |
| Family &/or Lodger Contributions | £ |  | Childcare Costs | £ |
| Other *please specify:* | £ |  | Other *please specify:* | £ |
|  **Total** | **£** |  |  **Total** | **£** |
| **Savings of all 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** |

Opportunities Award Application Form Page 2

Opportunities Award Application Form Page 1

**Purpose of request**

What is the total cost? ...............................................................................................................................................................

How much are you seeking from Barnwood Trust? ...............................................................................................................................................................

Please provide full details of the purpose of your request, a breakdown of your costs, how you wish to use this Award and how it will enhance your opportunities. Please continue on a separate sheet, if necessary.

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| **Consent** * I consent to the sharing of information relevant to this application with my referrer and/or any other professional listed on this application and any supplier of the Trust connected with the fulfilment of any grant awarded. **Yes / No**
* Our research team occasionally contact people who have received Barnwood grants to ask if they are willing to share any feedback on their experiences. Are you happy to be contacted? **Yes / No**

**Statement** By signing this form, I confirm that the details above give a true picture of my circumstances. |
| **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. |

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| **Please see the Guidance Notes and Checklist before returning your application form** |

Opportunities Award Application Form Page 2

**Barnwood Trust Opportunities Award**

**Guidance Notes**

Barnwood Trust is dedicated to supporting residents of Gloucestershire by providing help for those who are living with complex disabilities.

The Opportunities Award has been introduced to help people aged 18 or over with funding which could provide ongoing activities meaningful to them. Grant applications are expected to be in the range of £200 to £2,000. This will be in addition to the Wellbeing Fund, where we will continue to consider one-off grants to enable people to live independently. The Opportunities Award is not intended to fund anything normally considered by the Wellbeing Fund such as daily living equipment, mobility aids and holidays.

There are 2 different schemes:

**To provide you with the opportunity to attempt something new.** Awards are available towards training costs, books or equipment required. You will need to demonstrate your intended outcome, which should provide ongoing activity meaningful to you such as employment, volunteering or the ability to help others. This Award is not intended to cover University fees or associated costs for which you could receive a statutory grant or a student loan.

**To fund training or equipment which will enhance your ability to pursue your current hobby.** You must produce evidence that this has been your hobby for at least 12 months and explain how funding from the Opportunities Award will make a difference.

When completing your application form, please remember to explain how your request meets the criteria of this scheme and how this Award will enhance your opportunities and/or that of others. Please enclose a letter from your Support Worker or other professional who is able to confirm your disability and write in support of your request. If you are applying for a grant towards an activity such as employment or volunteering, we will also need confirmation from a health professional that your new project will not be detrimental to your medical condition.

If your request is over £500, you may be invited to come and have a conversation with us about your plans. Applications will then be considered at one of our monthly Grants Committee meetings. There will be a maximum sum available to award at each meeting, so it is possible that all applications will not be fully met. If your request is under £500, one of our Home Visitors will contact you to make an appointment to meet you and discuss your request. You should hear from us within 2-4 weeks of that visit.

If you are awarded a grant, you will be asked to provide a report after twelve months on how this grant has made a difference to you.

Opportunities Award Application Form Page 3

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| **In order to prevent any delays to your grant application, please check the following before returning your form:** |

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* Have you read the Guidance Notes fully?
* Have you or your legal representative signed Page 2 of the application form?
* Have you answered the Consent questions on Page 2?
* Have you included an up-to-date contact number?
* Have you included the full financial details of the household?
* If you are having difficulties completing your outgoings and you receive housing benefit or council tax support, please send us a copy of your up-to-date award notice.
* Have you attached evidence of your disability benefit e.g. an Award Letter *(PIP/DLA/ESA Support Group)?*
* If you do not receive DLA/PIP and are not in the ESA Support Group and have an ongoing mental health problem, has your mental health professional completed page 2 of the form? This should include your diagnosis, how long you have had this condition and how it affects you on a daily basis.
* Please let us know if you change your address or telephone number(s) as we will need to contact you throughout your application process.
* Please remember to enclose a letter of support from your Tutor, Doctor or other professional.
* If you are applying for a grant towards an activity such as employment or volunteering, we will also need confirmation from your health professional that your new project will not be harmful to your medical condition.
* If you are applying for funding to enhance an existing hobby, please include evidence that this has been your hobby for at least 12 months.

**Please return all 4 pages of this form, together with relevant letters of support to:**

The Grants Team

Barnwood Trust

Ullenwood Manor Farm

Ullenwood

Cheltenham

GL53 9QT

For information on how we process and store your information refer to our Privacy Policy on our website ([www.barnwoodtrust.org](http://www.barnwoodtrust.org))

Opportunities Award Application Form Page 4