

John Martin's Charity
 16 Queen's Road
 Evesham WR11 4JN
 Telephone – 01386 765440
www.johnmartins.org.uk
enquiries@johnmartins.org.uk

CONFIDENTIAL

**APPLICATION FORM
 MISCELLANEOUS EDUCATION GRANT**

Registered Charity No - 527473

Please complete all sections, enter "n/a" as appropriate. Supporting documents must be provided.

Parent's / Guardian's Personal Details:

| | | |
|----------------------------|-----------------------------|-----------------------------|
| Names & titles in full | Mr / Mrs / Miss / Ms/ Other | Mr / Mrs / Miss / Ms/ Other |
| | | |
| Names previously known by | | |
| Address | | |
| | | |
| Post Code | | |
| Telephone / Mobile phone | | |
| Dates of birth | | |
| National Insurance Numbers | | |

Student's Details:

| | |
|-----------------------------|--|
| Name in full | |
| Date of birth | |
| School/College/Organisation | |
| Details of course/activity | |
| Date and cost | |

Children, dependents or other occupants at the property.

| Name | Date of Birth | Relationship to applicant | Name of School/College/ employer etc. |
|------|---------------|---------------------------|---------------------------------------|
| | | | |
| | | | |
| | | | |
| | | | |

For office use - Date Issued:

Financial Details:**Recent supporting documents must be provided to evidence the following information:**

| Income | | Weekly/ 4weekly/monthly | | Weekly/ 4weekly/monthly |
|-----------------------------|---|----------------------------|-----------------------------------|----------------------------|
| Wages | £ | | Housing Costs | |
| Wages - partner | £ | | Rent/Mortgage paid by applicant/s | £ |
| Working Tax Credit | £ | | Housing benefit received | £ |
| Universal Credit /JSA | £ | | Total rent /Total mortgage | £ |
| Income Support | £ | | Rent/Mortgage arrears | £ |
| ESA / Sickness / Incapacity | £ | | | |
| Child Benefit | £ | | Council Tax paid by applicant/s | £ |
| Child Tax Credit | £ | | Council Tax support received | £ |
| Maintenance | £ | | Total Council tax | £ |
| Maternity benefit | £ | | Council Tax arrears | £ |
| Pension Credit | £ | | Council Tax Band | |
| State Pension | £ | | | |
| Private Pension | £ | | Capital | |
| Pension - partner | £ | | Bank | £ |
| Attendance Allowance | £ | | Building Society | £ |
| DLA – Care | £ | | Shares/ISA | £ |
| DLA – Mobility | £ | | National Savings/Bonds | £ |
| Invalid Care Allowance | £ | | Other | £ |
| Other: | £ | | | |
| | | | | |

Benefit Deductions

| Amount of deduction | £ | £ | £ | £ |
|---|---|---|---|---|
| Reasons i.e. social loan, fines etc... | | | | |
| Amount of loan | | | | |
| Final repayment date | | | | |

Are you a UK Resident for tax purposes?*If no, please provide tax reference & country*

YES

NO

By completing this Form, I/we acknowledge that John Martin's Charity may store and use this information in accordance with the Charity's Privacy Notice in order to consider providing me/us with grant assistance. The Privacy Notice is freely available from the Charity's office and website.

Other than where detailed in the Privacy Notice, if this information needs to be shared with third parties, John Martin's Charity will request my/our consent.

Note - False declarations will be deemed fraudulent, the application will be rejected and further applications will not be considered.

I/We declare that the information given by me/us on this Form is correct and completed to the best of my/our knowledge.

I/WE HAVE READ THE ABOVE DECLARATION AND REQUEST ASSISTANCE FROM THE CHARITY

Signed: Signed.....

Dated: Dated

All grants are awarded at Trustees' discretion.