

**Welfare Fund Loan / Grant Application Form**

I hereby state that the information I have given in this Welfare Fund application form is correct. I have in no way misled the fund into believing that the circumstances detailed below are not a true reflection of my current financial situation and surrounding circumstances. If I knowingly mislead the fund into loaning/granting me monies based on false information that I have given then the matter shall be passed to Professional Standards for investigation. This may also result in court proceedings being taken against me.

Signed		Date	
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Name:	
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Rank/Title		Service/Length	
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Address
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Home Tel No.		Mobile No:	
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E-Mail	
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If you have any dependant(s) please list their DOB and relationship to you. Also state if they are currently residing with you.

1. DoB		Relationship to you		Residing with you	<input type="checkbox"/>
2. DoB		Relationship to you		Residing with you	<input type="checkbox"/>
3. DoB		Relationship to you		Residing with you	<input type="checkbox"/>
4. DoB		Relationship to you		Residing with you	<input type="checkbox"/>

Welfare Fund member?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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Have you made a previous Welfare Fund application?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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Please give any outstanding balance loan amount £
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Please list current monthly loan repayments £

**If you are completing this application form on behalf of someone else, please provide your name, contact details and relationship to the applicant.**

Name	
Relationship to Applicant	
Address	
Signed	

**Financial Information**

The Trustee's are committed to assisting applicants in financial need wherever possible. As the Welfare Fund is a registered charity we cannot allocate funds as an alternative to other legitimate lending agencies, such as a bank or building society. We recognise that these other sources may not be available to some people with IVA's or a bankruptcy order. Therefore we need you to provide as much financial detail as possible.

**Please provide details of financial assistance you have sought prior to contacting the Welfare Fund.**

	Declined / Approved / Not able to Assist
Bank	
Building Society	
Family/Friends	
Other Charities	
Other Loan Companies	

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**Reason/Details for Financial Assistance**

**Box expands as necessary when completed electronically or continue on additional sheet(s)**

Please provide as much information as possible to enable the Trustees to fully understand your situation. Please include what steps you have taken to try and manage/resolve your financial difficulties. If the request is to fund specialist equipment i.e. wheelchair or shower/bath adaptation, please provide any specialist or medical reports. Please note that applications will be returned where there is insufficient information.

(When completing by hand, please use a separate sheet if required)

Signed	
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**Amount of Welfare Loan/Grant Requested as Detailed Above**

Quotes or documented proof such as bank statements, mortgage statements, credit card balance, may be requested.

£	
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**Financial Synopsis**

Please include your spouse/partner's income and any other financial contributions from persons residing with you, i.e. lodger(s) or rent from grown up children still residing at home.

<b>Monthly Income</b>			
	£		
Pay/ Pension			
Partner's Pay/ Pension (net)			
Rent Allowance			
Child Benefit			
Child Tax Credit			
Working Tax Credit			
Child Support Agency			
State Benefits			
Contributions – Lodger(s)			
Bank/ Building Society Interest			
Savings			
<b>Monthly expenditure</b>			
	£		
Mortgage/ Rent			
Mortgage Protection Policies (no. of Policies)			
Council Tax			
Water Rates			
Gas			
Electricity			
TV Licence			
Car: Insurance			
Car: Tax			
Car: Repayment loan			
Car: Petrol/ Diesel			
Telephone/ SKY/ NTL			
Mobile telephone			
House Contents/ Buildings Insurance			

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Other insurances			
Finance Company/ Loan Payments/ HP payments			
Store Cards			
Credit Cards			
Childcare			
Child Support Agency			
Leisure			
Children's clubs activities			
Housekeeping/ Food			
Drinking			
Smoking			
Papers/ Magazines			
Clothes			
Hairdresser's			
Window cleaner			
Gardener			
Holiday's			
Christmas			
<b><u>Total Income</u></b>	£		
<b><u>Total expenditure</u></b>	£		
<b><u>Balance</u></b>	£		

Return the completed form to the address listed below. Alternatively you may email your application internally to ; [Welfare Mailbox](#)

**Welfare Fund Administrator  
 Southern Support and Training HQ  
 Hamble Lane  
 Hamble  
 Hampshire Constabulary  
 SO31 4TS**

**Welfare Fund Loan / Grant Application Form****For official use only.**

Please consider referral to;

- Employee Support Helpline
- Unison
- Consumer Credit and Counselling Service
- Payplan
- Debt Wizard

**Outcome of Trustees**

AGREED

DECLINED

Grant; £

Loan: £

Repayment Details;