**Rotary’s Waverley-wide Covid Support Fund**

**Individual Application for Assistance Reference No:**

**Date Received:**

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| **Section 1**  Name: | Date of birth: |
| Address: | |
| Telephone (Home): Mobile: | |
| Email: | |
| **Section 2**  Referee’s Signature: Date:  Name: Occupation: Contact Number:  I certify that the above household is, in my opinion in need of the assistance applied for below and I attach a covering letter  Please tick the box below to confirm that you agree to us collecting, using, storing and sharing your personal information in accordance with the Fund Privacy Policy.  **🗆** | |
| **Section 3**  Assistance required (e.g. food/foodbank, support with fuel debt, household equipment, wheelchairs, care alarms, bed and beddings other) | |
| Reason for the application (e.g. financial situation and health issues). Note that the need must have arisen due to COVID-19. | |
| **Section 4**  Household finances (give details that you feel are relevant)  Total weekly income: £ Weekly expenditure: £ Do you receive State benefits, if yes, please state which:  Household details:  Number of adults living at this address Number of children living at this address Ages of children  Are you receiving help from other local charities/organisations? Yes No  If yes please give details | |
| **Section 5**  Applicant Signature: Date:  I certify that the above details are correct  Please tick the box below to confirm that you agree to us collecting, using, storing and sharing your personal information in accordance with the Fund Privacy Policy.  🗆 | |

**Please refer to the guidance notes overleaf to complete the application form**

**Guidance notes to complete the Individual Application Form**

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| **Section 1** |
| The applicant should complete this section in full giving full name, address and telephone numbers. An email address is also preferred for contact purposes. |
| **Section 2** |
| Applications are generally not considered unless they are supported by a referee. This could be a Social Worker, GP, Social Services, Home School Link Worker, Head Teacher, Health Visitor, Nurse or applicable Voluntary Organisation. The referee should know about the applicant’s situation and be able to verify the details. A covering letter/email must accompany the application. The referee should state their name and occupation and provide a telephone number for contact purposes. The Fund may contact the referee to verify details.  You are requested to confirm that you agree to the Fund processing your details and data in accordance with our privacy policy (available from our website at <https://www.rotaryc19fund.org/> ). |
| **Section 3** |
| It is important to state the type of assistance required. We would expect some effort to be made with regards to size and type of any goods required as well as their estimated costs. For example, if support with fuel bills are requested then we would expect details of these.  The second part of this section requires a clear description of the need for the application. This may require details of household or financial circumstances including health issues to support the application. Your application may be shared confidentially with the Citizen’s Advice Bureau, or another local organisation we think can assist help you. |
| **Section 4** |
| Please include any relevant household financial details including weekly income and expenditure, w h e t h e r the applicant receives State benefits, and the household details including the number of adults and dependent children.  It is important that details of what support has been received or requested from other charities/organisation is included. |
| **Section 5** |
| The applicant needs to sign and date this section and confirm that all the details are correct.  You are requested to confirm that you agree to t h e Fund collecting, using, storing and sharing your personal information in accordance with our privacy policy (available from our website at <https://www.rotaryc19fund.org/> ). It will only be used in connection with this application and kept confidentially.  **Please return the completed application by email to:** [**rotaryc19fund@gmail.com**](mailto:rotaryc19fund@gmail.com)  **Or by post to:** **Rotary’s Waverley-wide Covid Support Fund, c/o Godalming Town Council, Municipal Buildings, Bridge Street, Godalming, GU7 1HT** |