I

APPLICATION FOR A GRANT FROM THE

 JOSEPH & ANNIE CATTLE TRUST FUND



DO NOT USE THIS APPLICATION FORM TO APPLY ON BEHALF OF A RESIDENT OF HULL

**Individual grant applications on behalf of Hull residents are administered by Hull City Council’s Welfare Rights Service. You should contact them to request a referral form either by email to: welfare.rights@hullcc.gov.uk; or by telephone on 01482 300300.**

***NB. A Hull resident is defined by their home address being registered with Hull City Council for the purpose of any Council Tax Liability.***

This application form should be printed and **completed in legible handwriting**. Forms can be submitted by post or by fax.

Key Objective

The Joseph and Annie Cattle Trust are set up to help vulnerable people change their lives in Hull and the East Riding of Yorkshire, by providing financial support.

The aged, disabled and underprivileged are assisted wherever possible, as are children suffering from dyslexia.

The Trust **only** works with charitable bodies or statutory authorities and we do not provide grants to individuals directly.

There are two main types of application that we are looking to support.

**Firstly**, there are applications by charitable or statutory bodies on behalf of individuals or families. The application form must be completed by the charitable organisation/statutory body concerned and not the individual/family. Supporting papers should be attached where necessary.

**Secondly**, there are applications for projects and work with groups of people in Hull and East Yorkshire who are outlined in our key objective above. For these requests **do not complete this application form**. Instead you should please refer to our website (www.jacattletrust.co.uk) for further instruction.

**Completed applications should be sent to:**

The Administrator,

The Joseph & Annie Cattle Trust,

P O Box 23,

Patrington,

Hull,

HU12 0WF

Tel and Fax: 01964 671742

**Making an Application**

It is important you read the following guidance before submitting an application. This will help ensure that your client, and the support that they require, meets our criteria.

**How to apply:**

Applications must be completed by an organisation that is supporting the individual or family and which is capable of assessing their needs. The organisation should also be able to administer a grant on behalf of The Joseph & Annie Cattle Trust.

We can accept applications from a wide variety of organisations including statutory or charitable organisations providing a Health Care, Social Care or Advice Service, Probation and Youth Offending, Tenancy Support, Education Services, NHS and Primary Care Trusts, Sure Start and Children’s Centres.

Applications should be made by fully completing the application form that follows these guidelines, and submitting it along with a covering letter written on your organisations letterhead paper or containing your organisations stamp. Once an application has been determined we will notify you of the outcome in writing, whether the application has been successful or not.

**Our Criteria:**

• The Joseph & Annie Cattle Trust prioritise applications on behalf of persons who are facing exceptionally difficult circumstances or who are facing a crisis situation.

• We consider applications made on behalf of disabled people. In addition we consider those who are living in severe poverty, suffering deprivation as a result and who are facing additional social issues such as domestic violence, drug and alcohol misuse, estrangement, illness, distress, abuse, neglect, behavioural or mental health issues.

• Applications based mainly on financial hardship will not normally be considered.

• The Joseph & Annie Cattle Trust have expectancy that clients have exhausted all possible support from public funds before making an award. Workers should check to see if a person is eligible to apply for assistance from statutory sources before submitting an application on behalf of their client. This would include their Local Authority Welfare Provision.

• We do not encourage repeat applications unless there has been a significant change in the person’s circumstances.

• Applications cannot be accepted on behalf of a person who does not have recourse to public funds.

Items we CAN assist with:

The Joseph & Annie Cattle Trust Fund provide funds for critical household items such as:

• Electric cookers (including delivery and installation). Due to higher costs we are unable to consider gas cookers

• Fridge freezers (including delivery)

• Washing machines, particularly if there are disability or soiling issues (including delivery and installation)

• Beds and mattresses (including delivery)

• Carpeting (including delivery & fitting); however a maximum of £500 will be considered for carpeting.

• Specialist aids & equipment

**Items we CANNOT help with:**

As we receive a high volume of applications and have limited funding there are some items we are unable to consider, these include:

• Payment of fuel/utility bills, council tax or rent

• Payment of loans or debts, bankruptcy fees or rent deposits

• Household repairs/adaptations/additions

• Childcare/Child-minding/Afterschool clubs

• Televisions, computers, or any other item not considered essential to a person’s health and wellbeing

• Inexpensive items that can be purchased over a period of time such as bedding, towels, curtains and utensils

The Joseph & Annie Cattle Trust aim to provide a flexible grant programme to assist those most in need. If you are unsure as to whether your request will meet with our criteria and you wish to discuss a case prior to making an application, please feel free to contact us.

**Joseph & Annie Cattle Trust Application Form**

*(Please complete in black ink as this form will be photocopied)*

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| 1. **Organisation Details:**

Please complete fully and accurately as any award granted will be mailed to the name and address exactly as supplied. | Workers Name -  |  |
| Organisation Name -  |  |
| Address Line 1 -  |  |
| Address Line 2 -  |  |
| Address Line 3 -  |  |
| Postcode -  |  |
| Contact Number -  |  |
| Email Address -  |  |

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| 1. **Who does this application relate to:**

Details of main person only. In cases of assisting a child, the responsible adults’ details should be provided here, not the child’s details. | Clients Name (Full) -  |  |
| Date of Birth -  |  |
| Address Line 1 -  |  |
| Address Line 2 -  |  |
| Address Line 3 -  |  |
| Postcode -  |  |
| Contact Number -  |  |

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| 1. **Household Composition:**

List all additional members of the household and their relationship to your client detailed above. | Date of Birth: | Relation to Client: |
|       |       |       |
|       |       |       |
|       |       |       |
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| **4. Has your organisation received an award from this fund in relation any of the people listed in parts 2 and 3 in the previous 12 months?** |  |

If you have answered yes to section 4; please do not submit this application until you have contacted us to discuss this application.

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| **5. Does the person you are applying on behalf of have a disability?** |  |
| If Yes – Please describe below the persons disability and how it affects them: If No – Please describe below why you feel that your client meets our criteria (our criteria is detailed on page 2): |
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| **6. The assistance that you are seeking for your client:**Please explain your reasons for making this application, setting out all relevant circumstances such as any illnesses, financial misfortune or unforeseen event that has put the person at a disadvantage. **Do not** write ‘see attached’ as all sections of this form **must** **be completed**. Continue on a separate sheet of paper if necessary. |
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| **7. The help you are already providing to your client:** In addition to submitting this grant application; please explain what other assistance your organisation is providing to assist the person with their current need/situation. Continue on a separate sheet of paper if necessary. |
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**8. Item/s Requested and Payment Details:**

Please ensure that each item you request is essential to improving your client’s health and wellbeing. Remember that funds are limited and applications requesting lower amounts are more likely to be successful. We will only consider items that we feel are an immediate need for your client’s health & wellbeing.

**Our preferred payment method is a single cheque for the total amount, made payable to your organisation.**

Our Trust already has agreements in place with preferred suppliers for the following items:

**Emmaus** - to supply used sofa’s, dining tables with chairs, wardrobes and chests of drawers

**Bed World** - to supply beds, mattresses, wardrobes and chests of drawers

**Maple Leaf Ltd** - to supply electric cookers, microwave ovens, fridge freezers, washing machines, tumble dryers

**Southcoates Lane Carpets (Hull) Ltd** - to supply fitted carpets

**Alternative suppliers should not be used for any of the items available from our preferred suppliers.**

The provision of carpets will be restricted to a maximum amount of £500 per case and the total amount of funds made available for this use will be small.

**You must contact Southcoates Lane Carpets (Hull) Ltd** on 01482 712509 and ask that they provide you with an actual quote of the price including fitting and a written copy of the quote must accompany your application; without this document any request for carpets **will be declined.**

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| **Carpets** |
| **Room Description:** | **Preferred Colour Choice:**(available colours are Dark Grey, Silver Grey, Mid Brown or Beige) | **Amount Requested:****(including fitting)** |
|       |  | £ |
|       |  | £ |
|       |  | £ |
|       |  | £ |
|  |  | £ |
|       |  | £ |
| Subtotal: ⇨(amount requested for ‘Carpets’) | **£** |
| Cheque to be made payable to: |  |

For ‘Miscellaneous’ items you will need to identify a reputable supplier and obtain a written quote to accompany your application. Please ensure that you provide the exact details of the business name as it would need to appear on a cheque having verified this with the intended supplier. Please note that we are unable to make cheques payable to a named individual.

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| **Miscellaneous Items** |
| **Item Description:** | **Supplier Identified:****(Cheque to be made payable to)** | **Amount Requested:** |
|       |       | £ |
|       |       | £ |
|       |       | £ |
|       |       | £ |
|       |       | £ |
|       |       | £ |
|       |       | £ |
| Subtotal: ⇨(amount requested for ‘Miscellaneous Items’) | **£** |
| Cheque to be made payable to: |  |

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| **Furniture** (Used Condition) |
| **Item Description:** | **No. Req’d:** | **Emmaus Price:** | **Amount Requested:** |
| Wardrobe |  | £70.00 | £ |
| Chest of Drawers |  | £45.00 | £ |
| 2 Seater Sofa |  | £80.00 | £ |
| 3 Seater Sofa |  | £90.00 | £ |
| Dining Table & 4 Chairs |  | £70.00 | £ |
| Subtotal: ⇨(amount requested for ‘Furniture’) | **£** |
| Cheque to be made payable to: |  |

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| **Beds and Bedroom Furniture** (New) |
| **Item Description:** | **No. Req’d:** | **Bed World Price:** | **Amount Requested:** |
| Single Bed Frame |  | £59.00 | £ |
| Single Mattress |  | £55.00 | £ |
| Double Bed Frame |  | £85.00 | £ |
| Double Mattress |  | £86.00 | £ |
| Double Orthopaedic Mattress |  | £159.00 | £ |
| Bunk Beds (Frame Only) |  | £279.00 | £ |
| Ready Assembled 2 Door Wardrobe |  | £169.00 | £ |
| Ready Assembled 4 Drawer Chest |  | £135.00 | £ |
| Subtotal: ⇨(amount requested for ‘Bedroom Furniture’) | **£** |
| Cheque to be made payable to: |  |

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| **White Goods** (New) |
| **Item Description:** | **No. Req’d:** | **Maple Leaf Price:** | **Amount Requested:** |
| Electric Cooker |  | £305.00 | £ |
| Microwave Oven |  | £60.00 | £ |
| Integrated Single Fan Oven |  | £270.00 | £ |
| Integrated Electric Hob |  | £210.00 | £ |
| 145cm High Fridge Freezer |  | £276.00 | £ |
| 180cm High Fridge Freezer |  | £369.00 | £ |
| Under Counter Fridge |  | £185.00 | £ |
| Under Counter Fridge with Ice Box. |  | £185.00 | £ |
| Under Counter Freezer |  | £199.00 | £ |
| Washing Machine |  | £276.00 | £ |
| Subtotal: ⇨(amount requested for ‘White Goods’) | **£** |
| Cheque to be made payable to: |  |

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| **Grand Total: ⇨**(Total amount requested in this application) | **£** |

**All prices pre-entered in this application form are correct at the time of print; however these are subject to change.**

**The total amount requested in this application should not exceed £1,000.00 unless it is for a single item of specialist disability equipment**

Income & Expenditure

**PLEASE NOTE:** Failure to disclose all household income and expenditure may result in this application

being delayed or even declined.

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| **9. Benefit Income:** Please state the full rate of benefit (**before any deductions**) awarded to your client and members of their household. Any deductions from their benefits should be entered in the expenditure section on the next page. Benefit income declared will be checked against current benefit rates for accuracy. Any unclaimed entitlement may affect the outcome of this application. |
| **Name of Benefit** | **Weekly Amount (please convert)** | **Who Receives it?** | **Official Use Only** |
|  | ***Eg. £63.94*** | ***Eg. Mary Smith*** | ***(Example Only)*** |
| Income Support, Jobseekers Allowance or Pension Credit | £      |       |  |
| Universal Credit | £      |       |  |
| Employment Support Allowance | £      |       |  |
| State Retirement Pension | £      |       |  |
| Housing Benefit | £      |       |  |
| Council Tax Reduction | £      |       |  |
| Child Benefit | £      |       |  |
| Tax Credits | £      |       |  |
| Disability Living Allowance, Personal Independence Payment or Attendance Allowance | £      |       |  |
| Carers Allowance | £ |  |  |
| Other | £      |       |  |
|  | **£** | **⇦Total Weekly Benefit Income** |

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| **10. Other Household Income:** Detail income of all members of the household. |
| **Source of Income** | **Weekly Amount (please convert)** | **Who Receives it?** | **Official Use Only** |
|  | ***Eg. £45.00*** | ***Eg. Mary Smith*** | ***(Example Only)*** |
| Wages or Salary | £      |       |  |
| Partner’s Wages or Salary | £      |       |  |
| Pension/s | £      |       |  |
| Other | £      |       |  |
|  | **£** | **⇦Total Weekly Other Household Income** |

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| **11. Household Savings:** Please list all capital/savings held by members of the household. |
| **Type of Savings** | **Savings Amount** | **Who the savings belong to?** | **Official Use Only** |
| ***Eg. ISA Account*** | ***Eg. £1,850.00*** | ***Eg. Mary Smith*** | ***(Example Only)*** |
|  | £      |       |  |
|  | £      |       |  |
|  | £      |       |  |
|  | **£** | **⇦Total Savings** |  |

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| **12. Outgoings:** Please detail all outgoings accurately. Excessive or unrealistic amounts submitted may affect the outcome of this application and in some cases proofs may be requested. |
| **Type of Payment** | **Weekly Amount (please convert)** | **Who is this payment made to?** | **Official Use Only** |
| ***Eg. Landline Telephone*** | ***Eg. £4.00*** | ***Eg. Kingston Communications*** | ***(Example Only)*** |
| Rent or Mortgage | £       |       |  |
| Council Tax | £       |       |  |
| Gas | £       |       |  |
| Electricity | £       |       |  |
| Water | £       |       |  |
| TV (Rental/Licence/Sky) | £       |       |  |
| Landline Phone & Internet | £       |       |  |
| Mobile Phone/s | £       |       |  |
| Food/Groceries | £       |       |  |
| Household/Cleaning | £       |       |  |
| Cigarettes/Alcohol | £       |       |  |
| Travel Costs | £       |       |  |
| Insurance/s | £       |       |  |
| Clothing | £       |       |  |
| Fines | £       |       |  |
| Credit Cards/Loans | £       |       |  |
| Other | £       |       |  |
|  | **£** | **⇦Total Weekly Outgoings** |  |

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| **13. Has your client applied to the DWP for a ‘Hardship Payment’, ‘Short Term Benefit Advance’, Universal Credit Advance Payment, or a ‘Budgeting Loan’ in the last 3 months?** |  |
| **If Yes:** |
| When was the application made? |       |
| How much was awarded? |       |
| What was the award used for? |       |
| **If No:** |
| Please give reasons for not applying - |       |

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| **14. Has your client applied to their Local Authority’s Assistance Scheme for either a ‘Community Crisis Loan’ (CCL) or a ‘Community Crisis Grant’ (CCG) in the last 3 months?** |  |
| **NB: A person does not need to be in receipt of benefit to access the ‘Local Assistance Scheme’ and a CCG is non repayable.** |
| **If Yes:** |
| When was the application made? |       |
| How much was awarded? |       |
| What was the award used for? |       |
| **If No:** |
| Please give reasons for not applying – |       |

**PLEASE NOTE:** If your client is eligible to access the above funds, they should be applied to, **and the decision awaited** before submitting this application. Failure to do so, and/or failure to complete this section of the application form could result in this application being declined.

**This fund should not be used as a replacement for, or alternative to existing provision.**

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| **15. Payment & Award Information:** **IMPORTANT**The Trust awards grants to organisations only. Your organisation will be expected to use the funds to assist your client. As such it remains the responsibility of your organisation to make all the necessary purchases on behalf of your client. Your organisation should retain the receipts for all goods purchased and forward copies of these to us as soon as possible. As applications should only be made on behalf of clients with urgent needs it is expected that any funds granted will be used in a timely manner. If an award is not used within a reasonable timescale we reserve the right to cancel the award made and request that the funds be returned to the Trust.Any surplus funds that are no longer required should be returned to the Trust as soon as possible. Regrettably, we cannot authorise any funds that are granted to be used to purchase any additional items or alternative items to those which the grant was originally made for. |

**Declaration**

* I submit that I have completed this application on behalf of my client having personally identified that they have an urgent and essential need, and that they meet the criteria detailed on page 2 of this application pack.
* I understand that any award made in connection with this application will remain my organisations responsibility and I will ensure that any sum awarded is only used for the purpose for which it was applied for.
* I will provide copies of receipts for purchases made where possible.
* I understand that under no circumstances should the Trust cheques or any sum of cash obtained from awards made be passed directly to the client.
* I agree to return any surplus funds to the Trust as soon as possible.

SIGNATURE:       DATE:

ORGANISATION:

 (Name or Stamp)

**What Happens Next?**

1. Completed applications should be returned to the address provided below. You should make and retain a copy of the completed form for your own records.
2. Once your application is received it will be checked for completeness and accuracy. Incomplete or unsatisfactory applications will be declined at this stage. Acceptable applications are prepared for presenting to the Trustees at their next scheduled meeting.
3. The Trustees meet on a monthly basis to consider applications. Once they have determined your application you will be contacted in writing with the outcome. For this reason you are advised that applications can take up to a month to be determined and we ask that you refrain from contacting us to ask about your application outcome during this time.
4. If your application has been successful you will be notified in writing and a payment will be issued. We ask that you kindly acknowledge receipt of any payment. Copies of receipts for any goods purchased should be made and forwarded to us whenever possible. **All funds granted remain the responsibility of the organisation and under no circumstances should our cheques or any sums of cash be passed directly to the client.**
5. Funds awarded must only be used to purchase the items that have been granted. If following an award your client no longer requires the item/s granted, the funds must be returned to the Trust. Alternative items must not be purchased in these instances; however, a new application could be made on behalf of your client for any alternatively required items. As awards are made for clients with urgent needs it is expected that any funds awarded will be used in a timely manner.
6. If your application is declined, then confirmation will be sent to you in writing. Regrettably we are not able to provide reasons for refused or unsuccessful applications and there is no right of appeal.

**Completed applications should be sent to:**

The Administrator,

The Joseph & Annie Cattle Trust,

P O Box 23,

Patrington,

Hull,

HU12 0WF

Tel and Fax: 01964 671742

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