

Grant Application

Friends of the Elderly
40-42 Ebury Street
London
SW1W 0LZ



Before completing this application form please confirm that the individual you are representing is eligible for support, and has given you consent to make the application. More information on the grant process and the criteria can be found in our guidance notes, on our website or by contacting us on hello@fote.org.uk call 0330 332 1110

OUR GRANT CRITERIA

All applications must be completed by a third party agency – **we cannot accept applications from individuals, their family or friends.**

Examples of third party agents include local authorities, social services, housing associations, charities and community groups, health practitioners, Citizens Advice Bureau, or other support agencies. Please contact us before completing the process if you are unsure if your organisation is eligible to apply.

The application must be for:

- A grant of no more than £300
- A resident of England or Wales
- Who is of or above the current pensionable age
- Who receives Guaranteed Pension Credits*

If your application is for a larger amount we will only fund up to the final £300 of the cost and you must provide evidence that the rest of the funding has already been secured or pledged.

Exclusions: we do not fund people living in residential care or who have served in the armed forces

OUR SUPPORT

We align our grant giving to our charitable aims and support applications that enable older people to live fuller, happier, more independent

lives for longer. The three strands of our grant giving mean that we offer support to older people in many different ways;

Our **HOME ESSENTIALS** grants are for older people whose lives will be made easier through the provision of new home furnishings, kitchen appliances, mobility adaptations, or home repairs.

Our **DIGITAL CONNECTION** grants are there to help older people get online and stay better connected with friends and family. It covers equipment and broadband costs.

Our **FINANCIAL SUPPORT** grants are for older people affected by poverty or financial hardship and can be used towards utility bills, funeral costs, moving fees, etc.

THEIR STORY

We need to understand how the grant will be used and what difference it will make to the individual. This information will be used to assess your application so please provide as much information and context as possible.

WHAT YOU CAN EXPECT

We aim to confirm receipt of your application within 5 working days. At this point we will also confirm whether your application meets our grant criteria – if it does not feedback will be provided and you may resubmit. Our grant panel meets once a month, at which point a decision will be made. We will contact you to confirm whether your application has been successful or not and to finalise the payment of the grant to you direct, or to arrange for the purchase and delivery/installation of the item.

*applications will be considered for people on low income who are not in receipt of Guaranteed Pension Credit. Please call us on 0330 332 1110 for guidance before submitting your application.

The Application Form

Is the applicant;

Resident of England & Wales

Of or above the pensionable age

Receiving Guaranteed Pension Credit*

You confirm that the individual has consented to this application

Only proceed with the rest of the form if all four boxes are ticked

1. How much is the grant for?

2. What is it for (short description)?

Please provide a quote or Argos reference for the item, which includes delivery and installation, up to a maximum of £300.

3. Has the individual been referred to Friends of the Elderly before? Yes No

4. ABOUT THE APPLICANT

Title:

First Name:

Last Name:

Date of Birth:

Marital Status:

Home Address:

County: Post Code:

Tel Number:

5. DOES ANYONE ELSE LIVE AT THE SAME ADDRESS?

Title:

First Name:

Last Name:

Date of Birth: Relationship to Applicant:

* See previous page

6. APPLICANT'S WORK HISTORY

6.1 Has the applicant, or their partner, served in HM Forces. Due to the number of charities that provide support to ex-servicemen and women we will not provide grants to people with a military background. Yes No

6.2 What industries has the applicant or their partner worked in? if we are unable to help, we may know of other charities that may offer their support.

Industry	Role	Length of Employment
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

7. APPLICANT'S PROPERTY

7.1 Is the property; owned by the applicant
rented private
rented social housing

8. FINANCIAL SITUATION

8.1 Please supply the most recent copy of a DWP letter confirming the applicant is receiving Guaranteed Pension Credit. Tick here to confirm this is supplied

9. ABOUT THE GRANT

Use this space to tell us what the grant is for, why it is needed and what difference it will make.

<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>

This information will be used to complete the application process so provide information relevant to the applicant's situation - including the applicant's circumstances, why the item/support is needed and what difference the grant will make to their circumstance and well-being.

9.1 FINANCIAL SUPPORT - ADDITIONAL INFORMATION

If your application to us is part of a larger funding request please provide more information about the debt, how it is being repaid and any other sources of funding you have secured.

What is the debt for:

How much is it for:

How much is the applicant currently repaying each month:

£

If you are looking to repay the whole debt through funding please confirm who else is covering the rest of the cost;

Tick this box to confirm that each organisation listed above has already confirmed that they will be giving you the funding as requested. Please provide copies of emails or letters to demonstrate the funding is secured.

10. REFERRING AGENT DETAILS

Your name:

Your job title:

Your organisation:

Your organisation address:

Post Code:

Your contact number:

Your email:

Your organisation website:

If the application is approved please advise whether this is a direct purchase (we buy goods from Argos) or who the cheque is payable to. Note we do not provide payments directly to individuals.

11. DECLARATION

At Friends of the Elderly we value and respect your privacy. The data we gather and hold is managed in accordance with the Data Protection Act (1998). To process your application, it has been necessary to ask for some personal information. The information you provide will be held in Secure computer database and paper files.

I hereby certify that the information given is correct to the best of my knowledge and belief. I agree that Friends of the Elderly may approach any other charities or organisations in order to consult in confidence on matters relevant to this application. I authorise Friends of the Elderly to approach other agencies on my behalf. I agree that Friends of the Elderly may hold and process personal data about me in computer and paper files.

Applicant's Signature

Date:

We would love to keep you up to date with information on the charity, our services and fundraising through periodic communications by post and/or email

Yes, I am happy to receive updates through the post

Yes, I am happy to receive updates by email

Yes, I am happy to be contacted by telephone

Referring Agent's
Signature

Date:

Before you submit the application, please check:

You have completed all sections of the form

You have enclosed the most recent DWP or other supporting financial information

You have enclosed a quote for the item requested or an Argos reference number

The application form is legible