BORDEN UNITED CHARITIES C.I.O.

(Registered Charity No: 1209593)

GRANT APPLICATION FORM

In order to be considered, all sections of this form must be completed in full

Applicant Information	Details
Applicant	
Address	
Telephone No:	
E-mail:	
Age (please ring):	16-25 26-35 36-45 46-55 56-65 66-75 76-85 86-95
Occupation (if any)	
Marital Status (please ring)	Single Married Partner Widowed Divorced
Ages of family who are dependent upon applicant: • Adults (including Spouse/ Partner): • Children: • Others:	
How long resident within Parish:	
Weekly paid employment income: • Applicant: • Spouse/Partner: • dependents:	
Self & Spouse/Partner Income from other sources, e.g. • Pension State & Private: • Other Charities: • Other (e.g. Banks, etc.): • Dependents: • Benefits:	
Rent/Mortgage Payments per month:	

Please state any special circumstances	
Reason for Grant request:	
Have you applied before; if so when?	

If approved, please tick box for preferred payment method				
Cheque		Bank Credit		If Bank Credit, please supply the following:
Account name:			Account No:	Sort Code:

The Trustees reserve the right to visit to discuss this application, in person, prior to the awarding of the grant and will contact you if necessary.

I, the undersigned, hereby apply for a grant from Borden United Charities and confirm that the above representations are true. I understand that knowingly or recklessly making a false statement may result in prosecution and/or a fine upon prosecution:

Signed: _____

Please print name: _____

Date: _____

Please return the completed form, by one of the following methods:

By post: The Clerk, 53 Springvale, Iwade, Sittingbourne, Kent, ME9 8RX;

By email: bordenunitedcharities@gmail.com

Borden United Charities cares to ensure the security of personal data. This is done through appropriate technical measures and relevant policies. Data is kept for the purpose it was collected for and only for as long as is necessary. A copy of our Privacy Policy is attached.