**Edridge Application Form**

Before completing this application please read the guidance in each section. This provides further information on fully answering each question. If an Edridge Representative is based in your area, they will be able to assist you with this form.

**Section 1: Personal Details**

*Your name and contact details are important to enable us to get in touch with you and refer back to any previous applications. We do not need to use your work telephone number or email address if you prefer to provide your personal contact details.*

Name of applicant:

Any previous name:

*Age is useful for us to know, for example, if you are nearing retirement this may impact on your finances and will be considered.*

D.O.B:

Home Address

Telephone number: Home

 Mobile

 Work (not essential)

Email address: Home

 Work (not essential)

*Informing us about the people who you share your house with helps us establish levels of relative hardship. We may be able to signpost you to additional support / services to assist you or to identify any state benefits you may be entitled to.*

Please tell us how many dependants you have and their ages.

*If other members of your household have needs which impact upon your financial position, and are relevant to this application, please let us know in section four of the application.*

Please tell us how many non-dependant household members there are living with you.

**Section 2: Eligibility to apply to Edridge Fund**

*People who are entitled to join NAPO, either as a full member, or professional associate member are eligible to apply for assistance from the Edridge fund. It is not a requirement to be a member of NAPO to apply, merely to be eligible to join.*

* 1. *Full membership is available to people employed by the National Probation Service (NPS), Community Rehabilitation Companies (CRCs), CAFCASS, Probation Board Northern Ireland (PBNI), the Isle of Man or Channel Islands Probation Service.*
	2. *Professional Associate Membership is available to former probation or family court officers, working in social work education settings who were previously substantially employed in any of the organisations listed in 2.2, making substantial contributions to the training of probation or family court officers, social work staff in Approved Premises, Criminal Justice social work staff (Scotland).*
	3. *People who are retired and who spent more than 50 % of their time in employment working in one or more of the areas listed in paragraph 2.1. above are eligible to apply.*
	4. *People who are currently unemployed, seeking employment in a probation setting, and who worked in any of the areas listed in paragraphs 2.1 and 2.2 above in the last year are eligible to apply.*
	5. *Relatives or significant others who are dependant on the income of people eligible to join NAPO under the terms set out above, can apply.*
	6. *If an applicant is a member of a union other than NAPO, in the first instance Edridge staff will contact the applicant and provide details of the relevant union’s benevolent scheme. If an applicant does then apply to their own union fund, they can then re-apply to the Edridge fund for financial support if still needed.*

a: Provide the name and address of the relevant employer (this may be a current or previous employer).

b: Provide date of last eligible employment if retired or unemployed.

c: Please state the basis of your eligibility to apply to the fund.

d: If retired, please state how long you worked in the eligible role.

**Section 3:** **Additional or prior support opportunities**

*The Edridge Fund is a small charity with limited funds; therefore, it is best placed to assist with grants for specific essential items at times of crisis. We are not able to provide ongoing financial support. Where ongoing assistance is required, we will endeavour to signpost applicants to additional or alternative sources of support which may better meet their needs.*

1. Please tell us if you are currently a member of a trade union. If you are, please tell us the name of the trade union.
2. Please tell us if you have spoken to your local Edridge representative.
3. Please tell us if you have previously applied to the Edridge fund and if so, please give date of your previous application.
4. Please tell us if you have applied for help from any other union benevolent funds, charities, grant making organisations or sought assistance from any advice agencies.
5. Please tell us where you have applied for support and/or advice, when you did this and the outcome.

**Section 4: Reason for application**

*This section is an opportunity for applicants to explain the circumstances that have resulted in you requesting assistance from the fund.*

*4.1 In order to enable us to understand why you require assistance from the fund, it is important that you provide any relevant information regarding your personal circumstances. This may include illness, disability, relationship breakdown and /or loss of income.*

*4.2 We will help where we can if we ascertain that an applicant is in hardship. However, the Edridge Fund is a small charity and sometimes a contribution to what is needed is all we can offer.*

*4.3 The Edridge Fund is best placed to respond to issues of urgent need or unforeseen hardship, or to assist with the cost of specific needs associated with health, age, access, safety or security.*

*4.5 The Edridge Fund cannot provide ongoing financial assistance, but applicants can make a further application at a later time which will be considered on its own merits.*

*4.6 The Edridge Fund will not normally provide grants for:*

* *private medical payments*
* *further education*
* *private education*
* *hardship resulting from industrial action*

Please tell us why you are in hardship and the reason you need financial assistance. Please provide as much relevant information as possible.

**Section 5: Household income**

*In completing the income and expenditure section it is helpful to have recent bank statements / payslips etc. to hand. Referring to these documents will assist you to accurately identify the income and outgoings which need to be included in your application.*

*5.1 The benefit section highlights situations which may evidence the hardship of an applicant or alternatively, suggest areas where an applicant may be entitled to statutory benefits which may alleviate the hardship faced and provide ongoing support.*

*5.2 We ask for details of any savings so that we can understand your financial position. If you have set aside savings for a reason, please explain this to us and why your savings cannot be used as an alternative to a grant from the fund.*

1. Please tell us about your household income

|  |  |
| --- | --- |
| **Income source** | **Per month** |
| Net wages (after deductions - tax, NI, etc) |  |
| Partners net wages (if relevant) |  |
| Total income from pensions (if relevant) |  |
| Child maintenance received |  |
| Other (e.g. lodger, board from non-dependent children) |  |
| Universal Credit |  |
| Housing Benefit |  |
| Child Benefit  |  |
| Other (please specify) |  |
| **Total household income per month** | £ |

1. Please tell us if you are in receipt of council tax reduction (other than a single person’s allowance)
2. Please tell us if you have savings, and the total amount of savings you have.

**Section 6: Monthly expenditure**

*6.1 All items of expenditure listed may not be relevant to all applicants; the list has been broken down to enable all essential household costs to be listed.*

*6.2 The balance between income and expenditure will be used to determine levels of relative hardship, based upon the deficit / surplus between the two figures.*

*6.3 In addition, guidance based on Money Advice Service figures to indicate general hardship will be considered where relevant to provide consistency in the assessment process.*

*6.4 We ask that the more detailed debt table is completed to enable us to judge how we might best help or advise where an applicant has significant debts.*

*6.5 Where applicants are advised to seek specific debt advice and do so, the fund will be prepared to consider further financial help to enable a debt management plan to be established.*

1. Please tell us about your monthly expenditure

|  |  |
| --- | --- |
| **Household expenditure**  | **Per month** |
| Rent |  |
| Mortgage  |  |
| Any service or management charges |  |
| Council Tax (after any reduction) |  |
| Gas |  |
| Electricity |  |
| Other fuel costs (e.g. oil / coal) |  |
| Water / Sewage |  |
| Home insurance (contents/buildings) |  |
| TV licence |  |
| TV subscriptions |  |
| Internet |  |
| Child maintenance payments (outgoing)  |  |
|  |  |
| Grocery shopping (food, toiletries, cleaning products) |  |
| Clothing/footwear |  |
| Healthcare (private healthcare plans, medicine, optician, dentist) |  |
| Mobile phone costs |  |
| TV subscriptions |  |
|  |  |
| Car expenses, eg. Insurance, Tax, Maintenance, Breakdown Cover, Petrol |  |
| Car Purchase or Leasing Cost |  |
| Public transport costs |  |
|  |  |
| Other expenses (e.g. pets / leisure activities) |  |
| Saving commitments (e.g. accounts / Christmas clubs) |  |
| Total debt repayment (stated in table below) |  |
| **Total household expenditure per month** | **£** |

(b) Please tell us the details of outstanding loans, credit / store cards and arrears on priority bills e.g. mortgage, rent, council tax, utilities.

|  |  |  |
| --- | --- | --- |
| **Name of lender / creditor e.g. National Westminster Bank / Council tax/Store Card etc.**  | **Total amount outstanding**  | **Monthly payments** |
|  | £ | £ |
|  |  |  |
|  |  |  |
|  |  |  |
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|  |  |  |

*Statistical records of applications and related decisions will be maintained and monitored on a regular basis as part of the charity’s activities; this includes:*

* *Reviews of sample individual applications to check compliance with the fund’s criteria*
* *Ensuring equality of opportunity*
* *Providing reports to the Board of Trustees, the Charity Commission and NAPO AGM*
* *Number of complaints received.*