GRANT AID

PERSONAL APPLICATION

Hitchin Youth Trust
111 Walsworth Road
Hitchin
Herts
SG4 9SP

Tel: 01462 422505

Email: *info@hitchinyouthtrust.co.uk*

If you would like help to complete the form, please contact our office to make an appointment with a member of staff, who will be happy to assist you.

CONFIDENTIAL

Application forms are treated as strictly confidential. The information provided will only be used for the purposes of processing your application and will be handled in accordance with our Privacy Notice, which can be found on our website.

GRANT AID - PERSONAL APPLICATION

GUIDANCE NOTES FOR APPLICANTS

1. Grant Aid is provided in conformity with the Articles and Memoranda of Hitchin Youth Trust Ltd.

2. Grant Aid is restricted to Young Persons who have not reached their 26th birthday, are resident in the Trust's Operational Area, with the specific exclusion of Baldock, Letchworth, Royston and Stevenage. If you are in doubt regarding eligibility, need further information or help in completing this form, please contact Tel 01462 422505 or email info@hitchinyouthtrust.co.uk.

3. Awards are not considered for overseas travel, setting up of businesses, publicly funded bodies, or alterations / improvements to premises.

4. Grant Aid is awarded on the principle of providing the maximum benefit for the greatest number of young people, particularly those young people in the greatest need.

5. When considering applications, account is taken of the applicant's own efforts to provide the finances needed to achieve the intended objectives. Parental contributions are also considered.

6. Other than in exceptional circumstances, applications for Grant Aid may not be made more than once in any 12-month period.

7. If Grant Aid is needed for more than one year, it should be declared when the initial application is made. A separate application must be made for each year for which Grant Aid is required.

8. Applicants are required to have this form signed by Head of School, Activity/Project Leader, Head Volunteer or another professional supporter. Hitchin Youth Trust may then contact this person to verify and discuss the application with them.

9. Awards made by the Trust may only be used for the purpose(s) declared on the initial application. Recipients may be required to produce receipts as evidence that this requirement has been strictly adhered to.

10. Recipients of awards may also be required to provide regular progress reports and to give details of their final achievements.

11. Awards are limited and are intended only to assist applicants who have financial difficulties, or other unusual or difficult circumstances. When completing the application, it is essential that the fullest information be given. Failure to do so may result in the application being rejected. Please return the completed application to: **The Hon Secretary, Hitchin Youth Trust Ltd, 111 Walsworth Road, Hitchin, Herts SG4 9SP**

12. All applications, whatever their nature, are considered fully by the Trustees and decisions made based on the information provided.

13. All information provided by the applicant will be treated in the strictest confidence.

14. The decision of the Trustees in respect of any application is final and they will not entertain any correspondence relating to the decision. All applications remain the property of Hitchin Youth Trust Ltd.

15. All information received with and on the application form will be treated in confidence in line with our Privacy Notice available on our website.

GRANT AID – PERSONAL APPLICATION

APPLICATION FORM SECTIONS

SECTION 1 **Applicant (Young Person) Personal Information (Page 4)**
An applicant is a child or young person for which the funding is applied for

SECTION 2 **Primary & Secondary Supporter Personal Information (Page 5 & 6)**
A supporter is usually a legal parent or guardian of the applicant (Mother/Father/Guardian/Other)

SECTION 3 **Purpose of the application - Activity/Project details (Page 7)**
Please tell us what the grant will be used for and the amount you are requesting

SECTION 4 **Additional information to support the application (Page 8)**
Please use this page (or attach additional pages) for further information to support the application

SECTION 5 **Welfare Benefits, Sponsorships & Other Grants (Page 9)**
If applicable please detail any welfare benefits, sponsorships or other grants the applicant or supporters of the applicant are currently receiving

SECTION 6 **Declarations & Contact Details (Page 10 & 11)**
The application should be signed by:

- Applicant (Young Person) or Primary/Secondary Supporter if applicant is under 18
- Head of School, Activity/Project Leader, Head Volunteer or another professional supporter
- Referee

Please also add contact details of who we should contact if there are any queries on the form.

Once complete, please return **pages 4 - 11** and any supporting documents via post or email (see below).

By post or hand delivery:	By email (scanned or digitally edited):
Hitchin Youth Trust 111 Walsworth Road Hitchin Herts SG4 9SP	info@hitchinyouthtrust.co.uk

Reference Number HYT use only	

SECTION 1 – Applicant (Young Person) Personal Information

An applicant is a child or young person for which the funding is applied for

Young Person **Surname**:		
Young Person **First Name**:		
Age of Young Person **at time of application:**		
How long has the Young Person **lived in the Trust's Operational Area?** Hitchin and surrounding villages. A full list of towns & villages can be found on our website.		
Young Person's **Home Address(es):** If the young person lives at multiple addresses, please add them into this box.		
Does the Young Person **have any caring responsibilities?** If yes, please give basic details.	YES	NO
Is the Young **Person in full time education or training?** If yes, please give basic details including the name of the school/college/university.	YES	NO
Is the Young Person **presently employed?**	YES	NO
	FULL TIME	PART TIME
Monthly take home pay (after deductions):	£	
Annual Gross Salary (before deductions):	£	
Does the Young Person **have any other income?** If yes, please give details in Section 5.	YES	NO

SECTION 2 – Primary & Secondary Supporter Personal Information

A supporter is usually a legal parent or guardian of the applicant (Mother/Father/Guardian/Other)

Primary Supporter

Primary Supporter **Surname:**		
Primary Supporter **First Name:**		
Relationship to Applicant (Young Person):		
Primary Supporter **Home Address:**		
Is the Primary Supporter **presently employed?**	YES	NO
	FULL TIME	PART TIME
Occupation:		
Monthly take home pay (after deductions):	£	
Monthly Mortgage or Rent:	£	
Annual Gross Salary (before deductions):	£	
Does the Primary Supporter **have any other income?** If yes, please give details in Section 5.	YES	NO
Does the Primary Supporter **have any other dependants?** If yes, please provide their names & ages.	YES	NO

Is there any additional information (financial or personal) about the **Primary Supporter** you would like the Trustees to know when considering the application? You can also use Section 4 if you need to expand further.

Primary Supporter Declaration

- I declare that the information I have given in this application is correct.
- I agree to Hitchin Youth Trust holding my data in line with their Privacy Notice available on their website.

Signed:	
Date:	
Full Name:	

Secondary Supporter (if applicable)

A Secondary Supporter should be included if the applicant has a second legal guardian. If there is no second legal guardian, you can leave this section blank.

Secondary Supporter **Surname:**		
Secondary Supporter **First Name:**		
Relationship to Applicant (Young Person):		
Secondary Supporter **Home Address:**		
Is the Secondary Supporter **presently employed?**	YES	NO
	FULL TIME	PART TIME
Occupation:		
Monthly take home pay (after deductions):	£	
Monthly Mortgage or Rent:	£	
Annual Gross Salary (before deductions):	£	
Does the Secondary Supporter **have any other income?** If yes, please give details in Section 5.	YES	NO
Does the Secondary Supporter **have any other dependants?** If yes, please provide their names & ages.	YES	NO

Is there any additional information (financial or personal) about the **Secondary Supporter** you would like the Trustees to know when considering the application? You can also use Section 4 if you need to expand further.

Secondary Supporter Declaration

- I declare that the information I have given in this application is correct.
- I agree to Hitchin Youth Trust holding my data in line with their Privacy Notice available on their website.

Signed:	
Date:	
Full Name:	

SECTION 3 – Purpose of the application - Activity/Project details

What is the activity or project for which Grant Aid is requested? What will the grant be used towards? How will it benefit the young person?	
Name of the organisation/business where the activity/project takes place:	
Address of the organisation/business where the activity/project takes place:	
Start date of proposed activity or project:	
Expected duration of the activity or project*:	

**Grants will fund activities or projects for a maximum of 12 months, regardless of their expected duration. If an activity or project continues beyond 12 months, a new application must be submitted each additional year.*

Activity/Project Costs (per year or specified time above)

You may provide additional breakdown of costs on a separate page if necessary.

Fees:	£
Travel Expenses:	£
Equipment:	£
Other (please give details):	£
ACTIVITY/PROJECT COSTS TOTAL:	£

Applicant or/and Primary/Secondary Supporter Contributions

How much can you provide towards the activity/project?

Contribution from Applicant (Young Person):	£
Contribution from Primary/Secondary Supporter:	£
Other Sources (sponsorships, grants etc):	£
CONTRIBUTIONS TOTAL:	£

Grant Aid Requested

Please calculate how much you are requesting from Hitchin Youth Trust by taking the total cost of the activity/project and subtracting any contributions from the applicant or their supporters.

Activity/Project Costs Total		Contributions Total		**Total HYT Grant Aid Requested**
£	**-**	**£**	**=**	**£**

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SECTION 4 – Additional information to support the application

Please use this page (or attach additional pages) for further information to support the application. Although this section is optional, decisions are made based on the information provided to the Trustees, so supporting evidence is always welcome to help them understand the situation and the potential benefit a grant could make to a young person.

This may include:

- Explanations/breakdowns of how the grant aid will be spent
- Personal circumstances or current useful information about the applicant (young person) or primary/secondary supporter
- A letter from referral agency or professional supporter (Teacher, Family Support Worker, Scout Leader, Sports Coach etc)
- Any other relevant information which you think would help the Trustees consider the application

Please do NOT send sensitive medical or financial documents.

SECTION 5 – Welfare Benefits, Sponsorships & Other Grants *(if applicable)*

To be completed for the Applicant (Young Person) and Primary & Secondary Supporters of the Applicant, if applicable.

Welfare Benefits

Please fill in any applicable boxes with the amount (£) and whether the payment is weekly (W) or monthly (M). If you do not receive a particular benefit, please leave that box blank.

	Applicant (Young Person)	Primary Supporter	Secondary Supporter
Apprenticeship Training Scheme			
Post 16 Bursary			
Free School Meals			
Disability Living Allowance			
Personal Independence Payment			
Universal Credit			
New Style Job Seekers Allowance			
Employment Support Allowance			
Statutory Sick Pay			
Carer's Allowance			
Child Benefit			
Child Maintenance or Support (CSA)			
Council Tax Reduction			
Housing Benefit			
State Pension			
Pension Credit			
Attendance Allowance			
Other benefits, please state:			

Sponsorships & Other Grants

Other grants or sponsorship or other type of funding received or applied for.

Source	Type of Aid Provided & Time Period	Amount
		£
		£
		£
		£

SECTION 6 – Declarations

Applicant (Young Person) or Primary/Secondary Supporter if applicant is under 18

- I declare that the information I have given in this application is correct. I understand that Hitchin Youth Trust may contact the referee, or activity/project leader to verify this application and I give my permission for the application to be discussed with them.
- I understand that if an award is made, I may be required to provide receipts/certified progress reports.
- I agree to Hitchin Youth Trust holding my data in line with their Privacy Notice available on their website.

Signed:	
Date:	
Full Name:	

It is best practise that children over the age of 11 are aware of their personal data being shared in this application form and have access to our Privacy Notice (available on our website). We are aware that some applications are sensitive and therefore we leave this to your discretion.

Head of School, Activity/Project Leader, Head Volunteer or another professional supporter

- I certify that to the best of my knowledge, the information given on this application is correct and I consider the Applicant to be a suitable person to be considered for Grant Aid.
- I understand I may be contacted by a representative from Hitchin Youth Trust to verify this application.

Signed:	
Date:	
Full Name:	
Position:	
Organisation/School:	
Contact Telephone:	
Contact Email:	

Referee

This section should be completed by someone who has known the applicant for at least three years, is not a relative or under the age of 18 and is willing to be contacted by the Trustees for further information if needed.
If you cannot provide a reference, please let us know before submitting.

- I consider the applicant to be a suitable person to be considered for Grant Aid.
- I understand I may be contacted by a representative from Hitchin Youth Trust to verify this application.

Signed:	
Date:	
Full Name:	
Occupation:	
Contact Telephone:	
Contact Email:	
Please state how long you have known the applicant and in what capacity:	

Contact Details

Who should we contact regarding the outcome of the application or if we have any questions about the information provided on the form?

Name:	
Relationship to Applicant (Young Person):	
Email Address:	
Telephone Number:	

Once complete, please return **pages 4 - 11** and any supporting documents via post or email (see below).

By post or hand delivery: Hitchin Youth Trust 111 Walsworth Road Hitchin Herts SG4 9SP	By email (scanned or digitally edited): info@hitchinyouthtrust.co.uk