

Rotary Club of Worcester Sawyer Trust

Registered Charity Number 511276

Who can the Trust help?

We are able to help women aged 50 years and over who live in the United Kingdom and who are in need by virtue of financial hardship, sickness or poor health.

How can the Trust help?

We make a financial payment to cover an essential need approved by the Trustees.

If you are awarded a grant you will NOT be able to apply for a further grant for a three year period.

How can I apply to the Trust?

WE ONLY ACCEPT APPLICATIONS THAT ARE SUPPORTED BY A REFERRING ORGANISATION, for example, Citizens Advice Bureau; Age UK; another charity; your housing association debt officer.

The referring organisation needs to have met with you. An individual cannot be a referring organisation. The referring organisation needs to sign the application following a review of your affairs. If you are not sure about who can be a referee, please contact us.

How is the payment made?

We do not pay cash directly to applicants. When we make a grant for goods or services, we pay directly to the suppliers.

What sort of things does the Trust pay for?

We will normally consider applications for financial assistance towards the following:-

1. Domestic appliances - {fridges, freezers, washing machines, cookers, etc.}
2. Rent or accommodation arrears.
3. Payment of debts incurred with utility bills.
4. Medical & health aids – (contribution towards wheelchairs, stair lifts, aids to general living).

What sort of things will the Trust not pay for?

We will not consider applications for financial assistance towards the following:-

- Cash payments to individuals; Luxury goods or services; Parties or outings;
- Carpets; Building repairs and maintenance; Legal expenses; Credit card debt;
- On-going or recurring costs.

What about things not listed above?

This guidance is not exhaustive. Please contact us for advice if the issue is not covered above.

GUIDANCE NOTES FOR COMPLETING THE APPLICATION FORM

Your application **MUST** be supported by an organisation that understands your personal and financial situation. Both you and a person from the organisation, your Referee, must sign the form and it is recommended that they help you to complete the form, or complete the form on your behalf.

In order to make a decision on the granting of assistance, the Trustees need a full understanding of the financial circumstances of the applicant and the household they live in. This means the Trustees must have a FULLY COMPLETED application form and DOCUMENTARY EVIDENCE of the financial amounts entered on the form.

Please send COPIES of the required documents; the Trustees do not need originals.

All applications must be accompanied by a Bank Statement (or Post Office Account Statement) to show your regular income and expenditure for at least 2 recent months. If you cannot provide a bank statement, please explain why and send other evidence of income and expenditure.

Please do not leave any sections of the Application Form blank - {write "N/A" or "none" where a section does not apply so that the Trustees know that you have completed the section.)

Decisions on the granting of assistance are taken at regular meetings of the Board of Trustees.

Awarding of grants depends a) on the assessment of the application and b) the funds available for grants at the time of application.

Decisions can be made quite quickly but you may be asked to provide additional information if the required documentation is incomplete or unclear and this will delay your application. If this happens, you will have 6 WEEKS to provide the additional information requested by the Trustees.

We have tried to keep the form as simple as possible. This does mean that you might have income or assets for which there is no specific section. Please put the total amount in the section marked 'Other', and give us details on either Page 6 or on a separate sheet of paper.

Applications can only be made by post to the following address:-

SAWYER TRUST, PO BOX 797, WORCESTER, WR4 4BU

Please use the correct postage – large letters up to 100 grams need a large letter stamp – there are additional charges above 100 grams.

We will process your application as soon as we can. You will normally be sent an acknowledgement that we have received your application but if it is received close to a meeting, we may delay sending the notification pending a decision. Only contact us about an application if you have not heard from us within four weeks of its submission.

We are cannot be contacted by telephone.

<p>WORCESTER ROTARY CLUB</p> <p>SAWYER TRUST</p> <p>Charity registration number 511276</p> <p>GRANT APPLICATION FORM</p>	Official use only	
	Application Ref	
	Date received	
	Approved	

Every blank box in this form must be completed using the Guidance Notes, using "N/A" where not applicable to the application.

Section 1.0 APPLICANT INFORMATION

Title (Miss/Mrs/Ms etc)	Surname	Forenames

Date of Birth	Age at application OVER 50	Marital status; single/married/divorced/widow/ separated/with partner

Applicant's Address	Postcode
	Telephone number(s)
	Email address

Section 2.0 THE GRANT REQUESTED

Amount of Grant applied for	What would you use a grant for?

Section 3.0 THE REFERRING ORGANISATION

Name of referring organisation

Section 4.0 MORE ABOUT YOU

<p>Section 4.1</p> <p>Please explain the problems that have led to you needing to ask for a grant (e.g health issues, benefit changes, life changes etc.)</p>		
<p>Section 4.2</p> <p>Details of all other people in the household</p> <p>(if there is not enough space here, please use the last page, Page 6.)</p>	<p>Name</p>	
	<p>Age</p>	
	<p>Income</p>	
	<p>Relationship, & important facts about them</p>	

Section 5: FINANCIAL DETAILS **We need to have a complete and accurate understanding of all you have to live on.**

Please provide Bank or Post Office statements showing your financial position for **at least 2 recent months.**

<p>Section 5.1</p> <p>Please confirm that you have included the Bank Statements required</p>	<p>(Yes / No) If “No”, please explain why not</p>
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Section 5.2 We require a full understanding of all you have to live on.

List every kind of income below – crossing out those that do not apply. (please specify any other income)	Amount received	Is this per week, per month or per year?	Evidence MUST be provided either on bank statement or otherwise. Say what is provided.
Earnings ESA* or JSA*			
Pension (State and/or Private)			
Income Support			
Tax credit or Child credit			
Universal Credit			
Attendance Allowance or DLA* or PIP*			
Other.			

* - see page 6

Section 5.3 We need to have a clear understanding of your expenses

List essential living expenses in the spaces below:- (e.g. Housing costs, Gas/electricity/water/phone etc.)	Amount paid	State whether this is per week, per month or per year	What Evidence are you providing? (Please send copies only)
Full Home Rent charge (A) or Mortgage payment			
Housing Benefit (B)			
Home rental paid (A-B)			
Council Tax paid (after any Council Tax reduction)			
Gas/electricity			
Regular debt repayments (e.g. loans, agreements to repay benefit overpayments)			
Any other regular costs we should know about			

Section 5.4 We need to know if you have other Assets or Liabilities not described above. Please cross out any that do not apply and give evidence for those that do apply.

Asset	Value of asset	What evidence are you supplying? (Copies only)
Estimated Value of your home (if owned or part owned)		
Savings or investments		
Other		

Liability	Amount owing	What evidence are you supplying? (Copies only)
Mortgage owing on property		
Credit card debts		
Outstanding loan amounts or other debts		

Section 6.0 Details of Referring Organisation listed in Section 3.0

Name of Organisation			
Address			
Postcode		Telephone No	
Name of referee			
Position			
Email address			
Declaration	We confirm that we have reviewed this application and that, as far as we are aware, it is an accurate representation of the applicant's affairs.		
Signature			

Section 7.0 DECLARATION

Checklist	Cross out as appropriate
I have placed an answer in each blank box that applies to my application	YES / NO
I have provided a bank statement and the evidence requested at each section or I have explained why I have not provided it.	YES / NO
This is my first application to the Sawyer Trust	YES / No, I applied in (date)
SIGNATURE : This should be the applicant or a person holding power of attorney for the applicant.	
	Date

Please return this form with its supporting documents to:-

**Sawyer Trust
PO Box 797, Worcester, WR4 4BU**

Please use correct postage – large letters up to 100 grams require a large letter stamp, with additional charges above 100 grams.

All the information you have provided will be treated as confidential

If you have provided enough information for the trustees to understand your situation, your application will be considered at their next meeting.

Your application will be delayed If the trustees have to ask for further information,

Any further personal information which may help the trustees in considering the application may be provided – please use Page 6 overleaf or add as many pages as you need . (This may included details of weekly expenditure / medical treatment / time for recovery from injury or illness etc.)

PAGE 6. Any additional information you wish to include.

If your bank statement shows any inpayments or outpayments that are not explained by the regular amounts entered in Sections 5.2 or 5.3, we need to know about them here.....

- * ESA is Employment and Support Allowance
- * JSA is Jobseeker's Allowance
- * DLA is Disability Living Allowance
- * PIP is Personal Independence Payment