



Grant Application Form ~ Student

For students in further or higher education applying for financial support.
Please note that grants are intended to help with specific needs and cannot be used to pay off debts. We're also not able to offer funding in the form of a loan.

To help us process your application smoothly, please provide as much detail as you can.
If required, please use the space at the end for any additional information not covered (optional)

| Personal Information | |
|--|--|
| Full Name: Mr/Mrs/Ms/Miss | |
| Address & Postcode: | |
| Length of time at this address: | |
| If less than 1 year, previous address: | |
| Email Address: | |
| Secondary School with dates: | |
| Further Education College with dates: | |
| Higher Education University with dates: | |



Almondsbury Charity

| Support Requested | |
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| Please give detail: | |
| Amount Requested: £ | |
| Please list current benefits you receive: | |
| Other income: £ (e.g. work, pension) | |
| Total monthly income: £ | |
| Total monthly household expenses: £ | |
| Debt/arrears (brief details): | |
| Reason for Grant Request Please tell us a bit about why you are applying for a student contribution grant. It is helpful if you can include details about your current situation, what you need the funds for, and how this support will make a difference to you. | |
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| Supporting Documents (if applicable) | |
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|---|--|
| Referee / Support Worker | |
| Name: | |
| Job title & Organisation: | |
| Email: | |
| Declaration and Consent: | |
| <p>I confirm that the information I have provided is true and complete to the best of my knowledge. I understand that giving false information could mean my application is declined.</p> <p>If I receive a grant, I will use it only for the purpose stated, and if I receive the financial help from another source, I will return the amount given by Almondsbury Charity.</p> <p>I am happy for Almondsbury Charity to store and use my information for this application in line with data protection rules. I agree to be contacted if any further details are needed.</p> | |
| Signed: | |
| Date: | |

Return completed form to the Secretary Almondsbury Charity.
 Email: almondsbury-charity@outlook.com

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| If required, please use this space for any additional information not covered (optional) |
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