CLOUDESLEY GRANT APPLICATION FORM

Administered by Age UK Islington on behalf of Cloudesley

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| **Name of applicant:** |       |
| **Date of birth:** |       |
| **Address:** |       |
| **Postcode:** |       |
| **Telephone:** |       |
| **Email:** |       |

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| **Ethnic Group** |       |
| **Health Condition(s)** |       |
| **Housing Tenure** – records type of accommodation such as council, housing association, private |       |
| **Household** – records if living alone or with others |       |
| **Type of Grant** – Crisis or Catalyst |       |
| **Purpose for Grant** |       |
| **Appropriate evidence provided for eligibility?** |       |
| **Breakdown of items/services applied for including items cost**  |       |
| **Name of staff member completing the application** |       |
| **Date of application** |       |
| **SIGNED (Applicant)** |       |

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|  |  |
| **Passed onto Head of Service for consideration?** | [ ] YES [ ]  NO |
| **Application decision?** | [ ] YES [ ]  NO |
|  |  |
| **If approved has a Purchase Order Form been completed?** | [ ] YES [ ]  NO |
| **Has the completed purchase order form been sent to Head of Service for authorisation?** | [ ] YES [ ]  NO |
| **Has the Purchase Order Form been sent to finance officer?** | [ ] YES [ ]  NO |
| **Has order been placed by finance officer and confirmed with staff member and client?** | [ ] YES [ ]  NO |
| **Have items been delivered?** | [ ] YES [ ]  NO |
| **Application Completed?** | [ ] YES [ ]  NO |