



Application Grant for Tools

Read the guidance notes overleaf before completing this form

Personal details

Full name and address - (of applicant for whom grant required)

Telephone number (if over 18):

Email address (if over 18):

Date of birth:

Name and address of both parents/carer/responsible adult
(See note 3)

Telephone number:

Email address:

Income - (See Note 4)

Income of applicant (if any):

£

Household income excluding applicant:

£

Total gross household income including benefits:

£

Number of children in family - (other than applicant)

Infants - give ages:

In full time education - give ages:

Others living at home, waged or unwaged:

How long lived in Aylesbury?

Applicant for whom the grant is required:

Details of workplace of applicant			
Employer details?			
Address			
Tel number:		Email address:	
What role are you training to be?			

Training establishment	
Which training establishment will you be attending (if applicable)?	

Have you previously received a grant from this charity? If 'yes', please give details

Signature of applicant (if over 18):

Signature of parent/carer/responsible adult

_____ **Date** _____ **Date** _____

Please read these guidance notes to help you complete this form

1. Applicant **MUST LIVE IN AYLESBURY.**
2. Applicant **MUST BE UNDER 25 YEARS OF AGE.**
3. If for any reason you do not live with both your parents/carer/responsible adult, please explain why and precisely what your circumstances are. You should give details of any financial support you may receive from them.
4. The application is means tested. The Trustees require written evidence of all income e.g. P.60, wage slips, details of Universal Credit etc. - photocopies are acceptable, please do not send originals.

In the event that you live with your parents/carer/responsible adult but receive no financial support from them, please note that the Trustees still require this information as to their income.

5. The Charity's full Privacy Policy can be found on the website. By signing this form, you consent to the charity storing information about yourself and this application.

I declare the above information is correct and complete to the best of my knowledge.

**Any application received without all the required information
or paperwork will not be considered**

This form should be returned when completed to:

The Clerk to the Trustees, The Estate Office, Rickford House, 12 Rickfords Hill, Aylesbury, Bucks HP20 2RZ

Tel: 01296 761688 • Email: info@williamhardingcharity.co.uk