**This form is to be downloaded, completed electronically and emailed to:** **contact@thethreeoakstrust.co.uk** **[or send directly to an individual trustee, if they have given you their email address for this purpose]**

This form should be completed having read the Three Oaks Trust’s ‘Guidance for Requests to the Three Oaks Trust for Individuals and Families’, which can be found on the website. The Trust cannot always reply quickly to applications. Please do not apply for something from us which needs an immediate response. Emergency funding should be requested from Local Authorities / Statutory agencies rather than the Trust.

1. Name(s) of Service User/Client(s) with birthdate(s): *If this information is particularly sensitive then use only initials and dates of birth.*
2. Ethnic Group:
3. Address: *If this information is particularly sensitive then omit address, but please give location.*
4. Name or Professional submitting the request:
5. Occupational Role of (4) above:
6. Relevant training or qualification of the above professional: e.g.: CQSW, MA, NVQ, GCSE’s and/or years of experience working in relevant area:
7. Address for correspondence:
8. Professional’s Tel no and hours when contactable – either landline or mobile (mobile preferred).
9. Professional’s email address:
10. How long has the person been known to you or your agency?
11. Brief Description of Service User (Client) and family situation. Why is your agency involved?
12. Details of Items requested:
13. Expected benefit for the welfare of the service user: *(e.g If Mr X gains the full grant he feels he will be able to begin getting his life back on track as he has recently had counselling and understands how to organise things differently ......)*  For applications where debts have accrued it is necessary to show how the service user is looking to make changes.
14. What evidence is there of the client’s motivation/ability to help themselves and solve their problems? What help and support is being offered with this, if needed?
15. Details of the financial situation of the service user and/or the family I.e. income and outgoings including savings, mortgage/rent payment, other bills, statutory benefits and special allowance
16. The Trust would like to see details of a range of sources to which requests have been made to date:

Statutory sources:

Other:

**Total:**

1. **AMOUNT REQUESTED: £ xxxxxx**
2. **Payment details:**

All Three Oaks Trust grants are sent via BACS payments. Please provide us with:

1. **Details of Bank Account** used by your agency/organisation (except WSCC, LB Lambeth and Platfform *whose details we have)*
2. **A Payment Reference** - This enables the Finance team/officer to recognise the grant’s arrival and direct it to the correct budget for the worker’s use. Please provide this in every application.
* e.g. for **West Sussex County Council:** provide **your specific team’s** **Cost Code** + GL Code (general ledger code) + client/family surname or initials. eg JN19 8187 Smith
* For **Surrey County Council**: provide **client’s ICS/LCS/LAS number +client/family** surname or initials.eg ICS 67812 Jones.

**19. Date of Application:**