

Community Care Fund Application Form



These guidance notes must be read carefully in conjunction with the information on our website. Please visit www.kingston.gov.uk for more information.

Awards for support from our Community Care Fund are strictly discretionary. This means that the Council has the choice as to whether to make an award and will consider each application carefully based on the circumstances of each individual.

If you have made a recent claim for benefits from the Department for Work and Pensions (DWP) and you are waiting for a payment or increased payment of benefits from them, you will need to contact the local Job Centre Plus to claim a Short Term Benefit Advance (STBA) or Budgeting Loan. You will need to provide evidence to show that you have done this.

To claim a STBA or Budgeting Loan please call 0345 608 8545.

The DWP are still responsible for awarding the following:

- Sure Start Maternity Grant
- Cold Weather Payments and Winter Fuel Payments
- Funeral Payments

If you are struggling to stay in the community, we may be able to help you. We have a small fund to help you establish yourself or remain in the community. **We do not offer cash payments.** Instead the help you receive depends on your circumstances:

- if you are about to leave a care home, institution or hostel we may be able to help you with some basic items of furniture
- if you need help to stay in the community (rather than be placed in an institution or care home) we may help with expenses for improving your home to maintain living conditions, or help you move to a more suitable place to live, or be nearer to someone who will provide you with care and support
- if you are setting up home in the community as part of a planned resettlement programme following an unsettled way of life we may be able to help you with some basic items of furniture

The fund is very limited and so we need to prioritise those with the greatest need.

To apply for help from the community care fund you should:

- live in Kingston upon Thames at the moment and have lived here for at least the last six weeks, or
- have been housed outside of Kingston upon Thames by us, within the last six months, or
- if you are leaving prison be about to move to Kingston upon Thames

You should also:

- be about to leave hospital or other medical establishment, a care home, hostel, staff intensive sheltered housing, local authority care, prison or detention centre and be establishing yourself in the community, or
- need help to stay in the community rather than be placed in an institution or care home in which you will receive care, or
- need help to set up home in the community, as part of a planned resettlement programme, following an unsettled way of life

You must:

- be aged 16 or over
- receive one of the following benefits: Income Support, Income based Jobseeker's Allowance, Employment and Support Allowance (income-related), Pension Credit or Universal Credit (you may also be eligible if you are about to leave an institution or care home within six weeks and be likely to get one of these benefits)

Then you must also:

- not have savings that could be used to meet your needs
- not be able to resolve the situation through physical support from family and friends
- not have enough money or resources to prevent serious hardship to yourself or your family - a hardship which could affect your household's health or safety
- not be subject to immigration control

How we decide what we can assist you with

Upon receipt of your fully completed application, a Senior Officer will look at all of the information that you have provided before deciding if we can make an award. We may need to contact you if further information is required at this stage. As there is very limited funding we cannot make an award in every case. Therefore, it is important that we have as much information as possible in order to fully assess your situation as quickly as possible.

Privacy Statement

This application and all documents related to this application will be treated in line with the Data Protection Act 1998 and may be shared within the authority and with other authorities. Any data deemed to be 'sensitive personal data' under the Act will only be disclosed to third parties as necessary for the operation and administration of the scheme and to other organisations where necessary to establish entitlement or otherwise as required by law. Kingston Council's full Privacy Notice can be found on the Council's website at www.kingston.gov.uk

Before you begin your application, please tick the box to confirm that you have fully read these guidance notes.

Community Care Fund Application Form

This form should be filled in **by the person who is making the application.**

If you find it difficult to fill in this form, someone else can fill it in for you.

If you are filling in this form for someone else, **tell us about them** throughout the form and also **complete this page.**

Please use ink. Fill in the form by fully answering all the questions and requests for information. **Your application may be delayed if we do not have all the information we need.**

For people filling in and signing the form for someone else

Are you completing this form for someone else?

No Please make sure that you have answered all of the questions.

Yes Please tell us about yourself below

I am their Social Worker

I am their Resettlement Officer

I am their appointee

Other (please detail below)

If you are completing this form for someone else please fill in your details below so that we can contact you to if we have further questions:

Title (Mr, Mrs, Ms, Miss):

Forename:

Surname:

Address (or agency name, such as CAB)

Job Title

Telephone Number:

Email address:

These questions are about the person who requires support from our Community Care Fund

Do you have a partner?

	YES
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	NO
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By “partner” we mean someone of the same or opposite sex that you live with as a couple. You may be married or in a civil partnership or living together as if you were husband and wife or as if you were civil partners.

You (the claimant)
Title (Mr, Mrs, Ms, Miss): Forename(s): Surname: Date of birth:
National Insurance Number:
Address you wish to claim for, including full postcode:
Telephone Number: Email address:

Your partner
Title (Mr, Mrs, Ms, Miss): Forename(s): Surname: Date of birth:
National Insurance Number:
Address you wish to claim for, including full postcode: (please write SAME if same as the claimant)
Telephone Number: Email address:

About children for whom you get Child Benefit:

Do you have any children?

	YES
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	NO
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If you answered yes please add the details below:

Surname	First Names	Date of birth	Relationship to you (son or daughter)	Registered Blind Yes/No	Receives Disability Living Allowance YES/NO	Full time Student Yes/No

About other people who live with you:

Does anyone else live with you such as children for whom you do not receive child benefit, other relatives, tenants or lodgers?

	YES
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	NO
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If you answered yes please add the details below:

INCLUDE CHILDREN FOR WHOM YOU DO NOT GET CHILD BENEFIT				WORKING ✓ AS APPROPRIATE			NOT WORKING ✓ AS APPROPRIATE	
Surname	First Names	Date of birth	Relationship to you	State gross income per week	No. of hours worked per week	Student or apprentice	Not working	Disabled or long term sick

About your income:

Allowances and Benefits	Yourself	Wkly/Mthly	Partner	Wkly/Mthly
Income Support	£		£	
Jobseeker's Allowance	£		£	
Employment and Support Allowance	£		£	
Universal Credit	£		£	
Disability Living Allowance	£		£	
Personal Independence Payment	£		£	
Attendance Allowance	£		£	
Carer's Allowance	£		£	
Child Tax Credit	£		£	
Child Benefit	£		£	
State Retirement Pension	£		£	
War Pension	£		£	
War Widows Pension	£		£	
Pension Credit- Guaranteed Credit	£		£	
Pension Credit- Savings Credit	£		£	
Maintenance received/Child Support	£		£	

Please provide a breakdown of your expenses:

Expenses	Weekly £	Monthly £
Loans		
Rent		
Council Tax		
Water charges		
Home/Contents insurance		
Life assurance		
Magistrates' court fines		
Maintenance payments		
Telephone		
Gas		
Electricity		
Food, cleaning materials etc		
TV licence/rental		
Satellite/cable subscription		
Laundry/machine rental		
Car expenses/petrol		
Other travelling expenses		
Prescriptions		
Other medical expenses		
School meals		
Clothing and shoes		
Child's pocket money		
Child minding		
Catalogue repayments		
Credit card/store card debts		
Broadband/internet access		
Cigarettes/alcohol		
Entertainment		
Pets		
Any Other expenses; please specify		
Total expenses		

About Cash, Savings and Investments:

Please answer the following questions about any other capital:

	Yes	No	If Yes, please give details
Do you, your partner or any of your children have any money or property held in a trust fund?			
Do you, your partner or any of your children have any other capital, savings or investments, in the UK or abroad?			
Do you, your partner or any of your children own or partly own any property, land or timeshare, other than the home you live in, in the UK or abroad? This includes properties where there is an outstanding mortgage.			

You need to tell us about all of your bank accounts, building society accounts and Post Office accounts, and all other cash, savings and investments

Type of Capital	Name of Bank/Building Society	Account Number(s)	Yourself	Partner
			Please write the current balance(s) in the spaces provided	
Bank Accounts			£	£
Building Society Accounts			£	£
Post Office Account			£	£
Premium Bonds			£	£
Cash			£	£

If you and your partner have any other income or capital, please tell us about this below:

Has a claim for Short Term Benefit Advance or Budgeting Loan been made from the Department for Work and Pensions?

If yes – please confirm date of claim and outcome:

If no – please give reasons why a claim has not been made:

Your Rent:

The date that you moved into this address	
Amount of rent charged at this address	£ per week/ month/ four weekly (please circle)

Who are you renting your property from?

- Private Landlord
- Housing Association or other Registered Social Landlord
- Kingston Council

About the extra support that you need

Tell us:

- about your current circumstances (for example, you are leaving prison or you are being rehoused following a period of homelessness)
- what support you would like to apply for
- why you need this support
- how would this support help you to establish yourself in the community or remain in the community
- why you cannot obtain this support elsewhere

If you and any member of your household has any medical needs please give us full details below:

Please provide the following information with your completed claim form:

- Proof of all bank accounts, savings and investments such as the bank statements or updated bank books or investment certificates showing all of the last three months transactions and the current balance for all accounts you (and your partner if you have one) have.

If you do not have the original bank statements we may accept original printouts from your bank, which are usually printed on headed paper and date stamped. We may also accept printed statements from an online account as long as the web address is shown. We will not accept mini statements issued from a cash machine.

- Proof of the outcome of your Budgeting Loan application
- Proof of the outcome of your Short Term Benefit Advance Application
- Any medical evidence to support your application
- Any other evidence to support your application

Kingston Council may make enquiries about the information needed to support the application and to prevent fraud and to protect public funds. If you receive an award under the Crisis Fund Scheme or the Community Care Fund Scheme by providing incorrect details or not giving us full details or providing false information you could be prosecuted.

This declaration is legally binding. Please read all the points carefully and make sure you understand them before signing and dating and/or submitting the form:

- I declare that the information I have given on this form is correct and complete.
- I understand that if I knowingly give information that is incorrect or incomplete, I may be liable to prosecution or other action.
- I understand that I must promptly tell Kingston Council of any further information which may affect the outcome of my application which I become aware of after it has been made.
- I declare that if my award is paid by payment card I will spend it on the items for which it was made and if requested will provide receipts to confirm this.
- I understand that Kingston Council may check the information I have given with other sources and that Kingston Council may use any information I have provided in connection with this and any other claim for Social Security benefits that I have made or may make.
- I understand that Kingston Council will make a joint decision with other relevant services/organisations such as Adult Social Care, Children's Services, Probation Service, Drug and Alcohol unit, etc. that you are known to or it is considered in your interest to be referred to and may share information with these organisations, if the law allows this.
- I understand that Kingston council may share information with the organisations that are helping with the solutions such as Kingston Foodbank, Kingston Community Furniture, Surrey Save Credit Union etc., if the law allows this.
- I understand Kingston Council may share information with other Government organisations, if the law allows this.
- I understand that I must tell Kingston Council straightaway if I have a change of circumstances which may affect my application.

This is my application for an award from the Royal Borough of Kingston upon Thames Community Care Fund

Signature of claimant:	Date:
Signature of partner:	Date:

Contact Us

The Benefits Service
 Royal Borough of Kingston, Guildhall 2, Kingston upon Thames, Surrey KT1 1EU

Our telephone number is 020 8547 5001

We answer telephone calls Monday to Friday from 9.00am to 5.00pm

You may post your documents in the red post box based on the ground floor of Guildhall 2. Please ensure that your documents are in a sealed envelope. Please write your full name and address on the envelope and also state whether it is for the Crisis Fund or Community Care Fund. We will then return your documents to you.

EQUALITIES MONITORING SURVEY

To comply with The Equality Act 2010, it is recommended that, as a service provider the Council considers monitoring all of these categories, known as 'protected characteristics', sensitively and in confidence, to show that our services are fair. This information is confidential and will be stored in line with the requirements of the Data Protection Act. We will only use it to improve access to our Crisis Fund and Community Care Fund Scheme and help provide equal opportunities for everyone.

1. What is your gender?

Male		Female		Other		I would prefer not to say	
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2. What is your age?

16-25	
26-35	
36-45	
46-55	
56-65	
65 +	

3. What is your sexual orientation?

Bisexual	
Gay	
Heterosexual	
Lesbian	
Other	
I would prefer not to say	

4. What is your religion or belief?

Agnostic	
Atheist	
Buddhist	
Catholic	
Christian	
Hindu	
Jewish	
Muslim	
Sikh	
I would prefer not to say	

5. Are you blind?

Yes		No		I would prefer not to say	
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6. Are you deaf?

Yes		No		I would prefer not to say	
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7. If you have a long term physical or mental health condition or disability, which of the following options best describes the nature of your condition?

Learning Disability	<input type="checkbox"/>
Mental Health	<input type="checkbox"/>
Physical/Mobility	<input type="checkbox"/>
Sensory	<input type="checkbox"/>
Other	<input type="checkbox"/>
I would prefer not to say	<input type="checkbox"/>

8. What is your ethnic origin?

Arab

Asian or Asian British

Bangladeshi

Indian

Pakistani

Tamil

Any other South Asian background

Chinese

Korean

Japanese

Any other South-East Asian background

Black or Black British

African

Caribbean

Any other Black background

Mixed

White and Arabic

White and Asian

White and Black African

White and Black Caribbean

Any other mixed background

White

British

Eastern European

Irish

Gypsy or Irish Traveller

Mediterranean

Polish

Any other White background

Any other ethnic background

I would prefer not to say