

Name

**DEVON AND CORNWALL
AID FOR GIRLS TRUST**

Ref

Ref Code

Apps

Status

Grant

Chq No

Date

G.A.L.

C.A.L.

GRANTS IN AID

**DEVON & CORNWALL
FOR GIRLS TRUST**

Grants in aid are limited to GIRLS whose normal place of **AID** residences within the counties of Devon & Cornwall

(a) primarily orphans - that is those who have lost either or both parents

or (b) any other girl in need.

Grants are made towards the cost of care, maintenance or other needs; particularly in the case of those entering University, College or other Educational Establishment (or training Apprenticeship) for the provision of tools, books, special fees, travelling expenses or other items as may help them advance in their chosen livelihood.

All communications, and the attached application form when completed, should be addressed to
Mrs RL Knight
147 Outland Road, Peverell, Plymouth, Devon PL2 3PS
Tel 07738815865

NB Normally no awards are made for post-graduate, second or higher qualifications, home or part-time studies or to mature students.

All awards are made entirely at the discretion of the Trustees.

CONFIDENTIAL FORM FOR GRANT IN AID

Please note, this form is for completion by the Parent/Guardian of the person concerned. If not, a full explanation of the reasons must be given overleaf.

1. Details of person, on behalf of whom the application is being made:

a)NAME b) (Mr/Mrs/Ms)

c) PLACE AND DATE OF BIRTH

d) ADDRESS

.....

e) SCHOOLS ATTENDED (Please give dates)

.....

.....

2. For how many years has the above lived in the City of Plymouth

..... years

3. Is Father alive: Yes/No and living with the above Yes/No?

Is Mother alive: Yes/No and living with the above Yes/No?

4. If GCSE's, NVQ's, GNVQ's 1st Certificate or any higher education has been taken by the above, give details with dates and results:-

5. For what purpose is financial assistance being sought?

(i) For a Course or Programme of Study? if so, please state:

a) Establishment at which Course or Programme will be taken-

.....

b) Subject and qualification sought

.....

c) Starting date and duration of Course Programme

d) Finance sought not met by grants, training credits or remissions. Details must be given overleaf.

(ii) Other expenses not linked to a Course or Programme - details must be given overleaf.

6. Has application been made for assistance for the expenses shown in Question 5 to:
- a) Your Local Education Authority Yes/No Amount granted
 - b) Your School/College Access Fund Yes/No Amount granted
 - c) Your School/College Students Loan Scheme Yes/No Amount granted
 - d) Your bank for a loan Yes/No Amount granted
 - e) Any other source (e.g. Charity or Trust) Yes/No Amount granted
 - f) Please give details of Training Credits available to assist
 - g) If you have answered NO to any of the above, will you shortly be making applications (please indicate which)

7. Please state:

(i) INCOME of Father/Mother/Step-Parent/Guardian or Partner

- a) TOTAL annual earnings from employment/occupation before deduction of Income Tax; Superannuation; NI Contributions £ per year
- b) Any other Income such as Family Allowances, Pensions, Dividends, Rents? Type of Income Total per year £
- c) Any maintenance allowances received for the applicant £ per year

(ii) EXPENSES

- a) Council Tax paid £ per year
- b) If you rent or are buying the accommodation in which you live, please state:
 - (1) Rent £ per year
 - (2) Mortgage payments £ per year

(iii) OTHER EXPENSES

- a) Life Insurance £ per year
- b) Any other items £ per year

8. Please state number of dependent children in family with ages

9. Please state Occupation of Signatory
 Name and Address of Employer

Date Signed)Please state relationship)

Address (for correspondence)

This form to be returned to The Clerk, Mrs RL Knight
 147 Outland Road, Peverell, Plymouth, Devon PL2 3PS