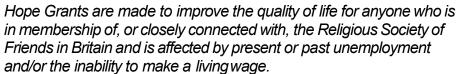


## Hope Grant Application





Please read the Guidance Notes before completing this Application Form Name of applicant

Address			
Postcode			
Telephone	Email		
Date of Birth	Age		
Local Meeting			
Are you a Member/Attender?		Yes	No
If No, please describe your connection with Quakers			
Are you currently looking for work?		Yes	No
Are you prevented from looking for work because you are caring for dependents?		Yes	No
Are you prevented from looking for work because you are sick or disabled?		Yes	No
How long have you been without work?			
Are <b>you</b> affected by long-term unemployment, or another family member?			
If you are in work, are you unable to make at least a living wage		Yes	No
Please give details			

If your circumstances are not adequately co- believe you may be eligible for a Hope Gran	vered by the previous questions please explain why you t.	
Amount of money being applied for (maximu	ım £750)	
Purpose for which the money would be used (give specific costs and other details):		
Signature of applicant	Date	
Please forward this form to a role holder in your meeting for them to complete the section below.		
This part to be completed by the support	ing Friend (who should be a role holder).	
I am a role holder in	Local Meeting,	
I am a role holder in of	Local Meeting, Area Meeting. Role:	
of I have read the Guidance Notes that accomp  • Is a member of, or closely connected	Area Meeting. Role:  pany this form and confirm that the applicant: d with the Religious Society of Friends in Britain; lue to present or past unemployment, or the inability to	
of  I have read the Guidance Notes that accomp  Is a member of, or closely connected solution.  Suffers impairment of quality of life of make a living wage;	Area Meeting. Role:  pany this form and confirm that the applicant: d with the Religious Society of Friends in Britain; lue to present or past unemployment, or the inability to	
of  I have read the Guidance Notes that accomp  Is a member of, or closely connected  Suffers impairment of quality of life of make a living wage;  And is fully eligible for Hope grant su	Area Meeting. Role:  pany this form and confirm that the applicant: d with the Religious Society of Friends in Britain; lue to present or past unemployment, or the inability to	
of  I have read the Guidance Notes that accomp  Is a member of, or closely connected a Suffers impairment of quality of life of make a living wage;  And is fully eligible for Hope grant sufficiency of role holder	Area Meeting. Role:  pany this form and confirm that the applicant: d with the Religious Society of Friends in Britain; lue to present or past unemployment, or the inability to	
of  I have read the Guidance Notes that accomp  Is a member of, or closely connected Suffers impairment of quality of life of make a living wage;  And is fully eligible for Hope grant sufficient Signature of role holder  Role holder's name (please print)	Area Meeting. Role:  pany this form and confirm that the applicant: d with the Religious Society of Friends in Britain; lue to present or past unemployment, or the inability to	

## Personal data consent

We collect data on this form for the purpose of processing grant applications. We require your consent to this processing.

We will only ask for personal data which is limited and relevant to the administration of the grant. This data will be held securely and will not be shared with any third parties without your notification and further consent. We will not transfer this data outside the EEA.

We will retain this data for a period of six years in compliance with financial best practice under the Limitations Act (1980).

Grant decisions may be minuted by a committee. These minutes will be retained permanently under BYM retention policy for historical purposes. Where minutes contain sensitive personal data they will remain closed to the public for 100 years.

Should you wish to access the data we hold on you, please contact BYM data safety group datasafety@quaker.org.uk . The data controller for BYM is Paul Parker, Recording Clerk. Should you wish to complain about our processing of your data, please contact: www.ico.org.uk Do you actively consent to our processing of the data you have given under the above conditions?

## Yes No Signature of applicant Supporting Friend Yes No Signature of supporting Friend Should you wish to withdraw your consent at any time, please contact: grants@quaker.org.uk

Please e-mail the completed form to Grants Officer <a href="mailto:grants@quaker.org.uk">grants@quaker.org.uk</a>

Friends House, 173 Euston Road, London NW1 2BJ Telephone 020 7663 1000