

APPLICATION FORM FOR FINANCIAL ASSISTANCE - Private and Confidential

Please note: we request that you or your partner have at least two years' employment service in any capacity within the UK furnishing industry to be eligible for financial assistance. If you would like to talk to someone before making your application, please contact Sue Dean, our Welfare Officer, on 020 7562 8528.

PLEASE COMPLETE ALL SECTIONS AS CLEARLY AS YOU CAN - THANK YOU

Full name		Mr Mrs	Miss	Ms	Other	(please circle)	
Date of birth		National Insurance Number					
Address							
		Postcode					
Marital status		Partner's full name				Date of birth	
Daytime contact number		Email					
Mobile number							
Have you or your partner worked in the furnishing industry? Yes/No If yes, please give details below.							
Name of Employer	What was you	r job?		Fro	m date	To date	

Have you applied to any other charities? Yes/No If yes, please give details below								
Organisation applied to		plication	status		Amount awarded			
- 0	<u>'</u>							
					<u> </u>			
How did you hear about The Furniture Makers' Company?								
<u></u>								
Housing	.0	0	:!/0! -! !! !	/D 4	- 1			
Do you rent your property	<i>[</i> ?	Cc	ouncil/Social Housin	g/Privat	e Landiord			
Do you own your property	y?							
0								
Current valuation of the p	roperty							
Outstanding martage								
Outstanding mortgage								
Who lives with you? Nan	nes relationshins	2000						
Who lives with you? Ivan	iles, relationsilips	s, ayes						
Total amount of savings	s held by memb	ers of yo	our household (if n	one, ple	ease write none)			
	_							
Current Account(s)		Building Society						
	£				£			
Bonds			PEPS/ISAs					
	£				£			
Premium Bonds			Stocks & Shares					
	£				£			
National Savings			Other					
	£				£			
If you have any debts, please list these below (including any amounts owing for household								
bills)								
0		N / 41- 1-		0				
Creditor		IVIONTNI	/ repayments		rent balance			
				out	standing			

Income and expenditure for the whole household (you can give weekly or monthly figures) Weekly Weekly Monthly Income Monthly **Expenditure** Salary (Net) Mortgage Partner's Salary (Net) Rent Working Tax Credit Council Tax (after benefit) Child Tax Credit Water / Sewerage Child Benefit Ground rent/Service Charge Sick Pay (Statutory/Company) Gas Maternity/Paternity Pay Electricity Universal Credit Telephone Job Seekers Allowance **Television Licence Employment Support Allowance** Insurances (ESA) Carer's Allowance Travel costs DLA/PIP Care Food / housekeeping DLA/PIP Mobility Clothing Attendance Allowance Childcare Industrial Injuries Benefit Child maintenance Income Support Care costs State Retirement Pension Medical Expenses Hairdresser/Gardener/ Other Pension(s) Window Cleaner etc. Pension Credit House Maintenance Child Maintenance Meals on Wheels Alarm Care Line Income from charities Housing Benefit Outings/Days Out Other income (specify) Pets Other (specify)

Please use this page to tell us about your current difficulties, why you are making this application and what help you would like us to consider.				

I declare that the information I have given on this form I understand that you will use the information I have prassistance. Please read the Privacy Notice below, wh information you have supplied.	ovided to process my application for
Applicant's signature	Date

Privacy Notice

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When you apply to the Furniture Makers' Company for assistance, we ask for your personal details and details of your financial circumstances, in order to fully understand your situation and so that we can make a decision about how we can best assist you.

Partner's signature......Date......Date.....

We will store the information you provide on our computer database and in our filing systems, in order to process your application, and record the outcome. Unless you ask us not to do so, we will retain this information, so that, should you apply to us for help in the future, we have a record of your past application(s).

Under General Data Protection regulations, we have assessed that we have a legitimate interest in processing the personal data you have provided, because without doing so, we would not be able to deal with your application for assistance.

We will keep your information confidentially and securely within our organisation, except that:

- 1. Where we have agreed to supply you with goods that you have requested, such as cooker, fridge, furniture etc., we will give your contact details to the company supplying the goods, in order that they can make a delivery to you.
- 2. Where you have requested financial assistance to pay a bill, we may contact that company, giving your contact details and reference, in order to find out the payment details we need, to make the payment.
- 3. Where you have told us that you have applied to another organisation for assistance, we may contact that organisation to request details of any help that they have agreed to provide. Where we think that you may be eligible to apply to another charity or organisation, we will advise you of this.

You have the right to request a copy of the data we are holding about you. We will supply this for you within one month, if you apply in writing to us at:

Welfare Department, The Furniture Makers' Company, 12 Austin Friars London EC2N 2HE

You have the right to request us to delete any data we hold about you, and can request this by writing to the above address.

Please return your completed application form with a recent bank statement and supporting documentation to:

Welfare Officer, The Furniture Makers' Company, Furniture Makers' Hall 12 Austin Friars London EC2N 2HE 020 7562 8528 welfareofficer@furnituremakers.org.uk

The Worshipful Company of Furniture Makers is incorporated by Royal Charter (Company Number RC000866). The Worshipful Company of Furniture Makers' Charitable Funds incorporating the Furnishing Trades Benevolent Association (Charity Number 1015519). The Furniture Makers' Company Limited (Charity Number 1118569). Registered address: Furniture Makers' Hall 12 Austin Friars London EC2N 2HE.