

GEMMA FUND GRANT APPLICATION FORM

Client Name:

Address:

.....

Postcode:

Reason for Application (separate can be attached if required):

.....

Initial Assessment Carried out by:.....

Place of Assessment: Date of Assessment:

Photocopies of Identification documents X 2 (these must be included with application form)

Passport

Maternity Certificate

Birth Certificate

Proof of Address

Bill

Driving Licence

DSS Letter

Job Centre plus

Other (please state)

Office Use Only : Authorisation given by Gemma Fund Committee

Date of Letter of authorisation:

Amount:

Signature:

Receipts returned to Finance Dept.

Verification of application

Date cheque sent

Other

Application completed: Signed Date: