



City Of Southend Jewish Community Support (COSJCS) GRANT APPLICATION FORM

Please fill in this form with as much detail as possible. You may wish to attach separate pages of evidence to the form to support your application.

PERSONAL DETAILS

Name of Applicant(s)	
Date(s) of Birth	
Marital Status*	Married Divorced Single Partner * Click/Tick relevant box
Address	Number and street
	Town/City
	Postcode
Email Address	
Mobile Phone Number	
Current State of Health	
Dependants	Names – Age - Relationship

GRANT

Amount of Grant Requested	£
Details/Purpose of Grant (Please attach any supporting documents to this form)	

ASSETS

	Value (£)	Details
Home		
Other Property		
Cash		
Investments		
Other		

LIABILITIES

	Value (£)	Details
Mortgage		
Loans		
Credit Cards		
Other Debt		

INCOME (monthly)

	Value (£)	Details
Earned Income		
State Pension		
Private Pension(s)		
State Benefit(s)		
Other		

EXPENSES (monthly)

	Value (£)	Details
Gas Electricity Water		
Rent		
Council Tax		
Loan Repayments		
Food		

Other Expenses (Please provide full details)	
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OTHER INFORMATION

If you believe there is any other information that is pertinent to this grant application, please attach on separate sheets to this form.

BANK STATEMENTS

Please provide the last 3 months' bank/building society statements for all accounts.

SIGNATURE

I certify the accuracy of this information for the purposes of applying for a Grant from COSJCS and understand that any misrepresentation may constitute a criminal offence.

Signature of applicant(s)

Date of application _____

Please print out and post along with supporting documents to:
 COSJCS, 1386 London Road. Leigh On Sea, Essex SS9 2UJ

TRUSTEE USE ONLY

Approved Declined

Trustee Signatures

Date _____

NOTES