

## Application to Harrow’s Hardship Fund Scheme

The Hardship Fund Scheme is a discretionary service which supports qualifying residents in extreme emergency situations. The service provides low level awards of between £10 and up to £100 in the form of either food vouchers or vouchers to be used to obtain emergency food, top up gas or electric meters or pay for a travel warrant, clothes etc., so long as this need cannot be met elsewhere, including grants from Department for Work and Pensions (DWP).

This service is only for short term support and where there is a risk to the safety and/or health of the household. It will:

- Assist people to remain or return to the community; and/or
- Help people who are suffering severe and exceptional hardship

If you have made a new claim for benefits and are experiencing financial problems whilst waiting for your application to be processed you should contact the Department of Work and Pensions on 0800 055 6688.

To access the Hardship Fund Scheme you must meet all of the following criteria as stated below. Please check that all points apply to you, or someone in the household you are applying for. You will not be able to get assistance from the scheme if you do not meet all of the criteria.

**You will be required to provide Photo ID such as a Driving Licence or Passport and up to date bank statements (showing at least the most recent ten transactions and available balance).**

Further evidence may also be required. We will contact you to let you know what we need when we assess your claim.

- |  |                          |
|--|--------------------------|
| • I have lived in Harrow for 3 months or more  | <input type="checkbox"/> |
| • I am fleeing violence, leaving residential care, leaving institutional care (including hospital), leaving prison   | <input type="checkbox"/> |
| • I have the right to live in the UK and am not prevented by immigration rules from getting benefits and other state help  | <input type="checkbox"/> |
| • I am over 16 years old   | <input type="checkbox"/> |
| • I receive a means tested benefit. (Examples of these are: Income Support, Job Seekers Allowance (Income Based), Employment Support Allowance (Income Related), Pension Credit, Working/Child Tax Credit, Housing Benefit, Council Tax Support, Universal Credit) | <input type="checkbox"/> |
| • I do not have enough savings to buy what I need  | <input type="checkbox"/> |
| • I do not have any friends or family who could help me  | <input type="checkbox"/> |
| • I have not received two awards from the Hardship Fund/Emergency Relief Scheme (s) in the last 12 months  | <input type="checkbox"/> |

If you have fulfilled all the criteria shown, you can complete the application form and return it to **Access Harrow, Civic Centre or by post to London Borough of Harrow, Freepost, PO Box 730, Civic Centre, Harrow, Middlesex HA1 2DU.**

Should you meet all the initial criteria, this does not guarantee an award will be paid. You will then be referred through to the Hardship Fund Scheme where you will be assessed in more detail to identify the risk to safety and health if your need is not met. A decision will then be made on whether emergency support can be provided.

It is important to note that an award from the Hardship Fund Scheme may also require you to agree to access advice and support to help you longer term. This could include things like work programmes or financial budgeting advice.

## Hardship Fund Scheme Application Form

Please complete all sections of the form in **black** ink and in capital letters. Tell us everything you think we should know, continuing on a separate sheet of paper if necessary. **If you do not provide all of the information requested it may delay a decision being made about your application.**

### Section 1 – About you

Surname:  Forename(s):

Date of Birth:  National Insurance Number:

Current Address:   
Postcode

If you have not lived at this Address for at least 3 months, Please provide your previous address:   
Postcode

Contact Telephone Number (*You must complete this box or it may delay any award to you – if you do not have a telephone please give us the name and number of someone who can get a message to you*):

Email Address:

**Are you completing this form on behalf of someone else?** (*Please complete all details below for the customer in need*) *In this box please complete your details, your name, contact number and state in what capacity are you acting for this customer*)

Name
Contact details
Relationship to applicant ( <i>ie.family/support worker/interpreter</i> )

Have you been placed in Harrow by another Local Authority?

**If yes, then you will need to approach that Authority for assistance.** Yes  No

If you have nowhere to live please tick this box

Did you have to leave home because of violence? Yes  No

Are you leaving institutional care? Yes  No

Are you leaving hospital? Yes  No

Are you leaving prison? Yes  No

If you have ticked yes to any of the questions above please give the dates you entered and left institutional care, hospital or prison. Date entered  Date left

Have you made a previous application in the last 12 months for any of the following? Budgeting Loan, Hardship Fund Scheme Payment, Emergency Relief or Short Term Benefit Advance in the last 12 months or have you approached another Organisation for help at the moment?

Yes  No  Which One?

If yes, what was this application for? and who paid the grant to you? If unsuccessful please tell us the organisation who refused the application and reasons for refusal:

Have you or your partner made an application for asylum, been refused a benefit or are still awaiting a decision because of your immigration status (for example due to a Habitual Residence Test)?

Yes  No

If yes, please provide us with further details and supply evidence with your Hardship Fund Scheme application:

Please tell us about any professionals who may be involved in your case i.e Social worker, Probation officer, Housing Officer, GP etc. **Please note we may contact them about this application, if needed.**

Contact Name .....What is their role e.g. G.P..... Organisation Name..... Telephone number.....
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**We need to know about any benefits you or your partners (if you have one) receive. Please complete the table below to show which benefits you get.**

Benefits	Do you/partner receive this benefit? Yes/No	Date of last payment	Expected date of next payment
Income Support			
Job Seekers Allowance (income /contribution based)			
Housing Benefit / Council Tax Support			
Employment Support Allowance (income/contribution related)			
Pension Credit			
Disability Living Allowance (any component)			
Incapacity Benefit Mobility Supplement			
Working/Child Tax Credits			
Universal Credit			
Severe Disablement Allowance			
War Widows Pension			
War Disablement Pension			

Are you registered blind?

Yes

No

Do you qualify for a disabled  
Council Tax Band reduction?

Yes

No

Are you working?

Yes

No

When did you start work or become self-employed?

Please complete the attached income and expenses form to show all of your income including earnings or benefits you receive, daily living expenses, outstanding debts, and any savings you may have.

## **Section 2 – About other people who may live with you**

Do you have a partner?

Yes

No

Please provide your partner's  
Surname:

Partner's  
Forename:

Please provide your partner's  
National Insurance Number

Please provide  
your partner's  
Date of birth

Does anyone else, over the age of 16 years (*that you do not receive child benefit for*) live with you?

Yes

No

If yes, please provide their names, dates of birth and income details in the table below.

<b>Full Name</b>	<b>Gender Male/Female</b>	<b>Date of Birth</b>	<b>Income</b> Please list all of the income they have including earnings and benefits	<b>Amount</b> Please state the amount for each type of income you have listed in the previous column

Do you have any children, who you receive child benefit for, living with you?

<b>Full Name</b>	<b>Gender</b>	<b>Date of Birth</b>	<b>Do you receive maintenance for them?</b> Please state how much and how often	<b>Do they have any child care costs?</b> Please state how much, how often and what they are for.

Do you or anyone living with you suffer from any major health issues? Please supply details below (*we may request evidence of the information you provide*):

<b><i>Please give their full name</i></b>	<b><i>Please state the health issue</i></b>

## **Section 3 – Why do you need assistance from the Hardship Fund Scheme?**

The Hardship Fund Scheme will not be able to help everybody as there are limited funds. To be successful you must meet the initial eligibility criteria. The Hardship Fund Team will then carry out a further detailed assessment.

If you are successful we will meet your need by giving you a food voucher or the item you need, rather than cash. You may be asked to access other advice and support to help you improve your financial situation.

**What help do you wish to apply for from the Hardship Fund Scheme?** *(Please explain below what has happened recently that has led you to make this claim and why you do not have the items requested. Please also explain the difficulties you are currently experiencing)*

Type of 'In Kind' Support that may be offered to you:

**FOOD**

Please give the date you require this item from?  
*(If you need it immediately, state 'immediately')*

Please explain why you do not have any food and how this is affecting you. Please tell us how many days food you have left at present for your family?

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**EMERGENCY ENERGY FUEL**  
*(eg. gas/ electricity)*

Please give the date you require this item from?  
*(If you need it immediately, state 'immediately')*

Please explain why you have run out of fuel and how this is affecting you. Please tell us how much credit you have left on your key meters?

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**EMERGENCY TRAVEL** Please give the date you require this travel on?  
*(If you need it immediately, state 'immediately')*

Please explain what the emergency is. If you are unable to travel, how will this affect you?

.....

.....



**EMERGENCY CLOTHING**

Please give the date you require this item from?  
 (If you need it immediately, state 'immediately')

Please explain what items you need and why you need these items? If you do not have these items how will this affect you? Please tell us what clothing you/your family has at the moment?

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**Section 4 – Additional information**

**What will happen if you do not get help from the Hardship Fund Scheme?**

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**What action have you taken to help yourself before applying to the Hardship Fund Scheme?**

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Is there anyone else you know who can help you? Yes  No

You must sign this declaration, even if someone has completed the form on your behalf.  
**IMPORTANT:** It is vital that you fully read and understand the declaration below before you sign and date it. If you do not understand any part of it, please ask a member of Harrow Council Hardship Fund Scheme Team for further guidance.

- I understand that this claim is made to you, Harrow Council.
- I declare that the information I have given on this form is correct and complete as far as I know and believe.
- I understand that if I knowingly give information that is incorrect or incomplete, I may be liable to prosecution or other action.
- I agree that you will use the information I have provided to process this claim for the Hardship Fund Scheme. You may check some of the information with other sources as allowed by law.
- I understand that you will use the information I provide to process this claim and any other claim I have made or might make in the future for social security, welfare or related benefits. You may share some or all of the information with other Council services, data processors acting on the Council's behalf, including relevant credit agencies, your partners and other public authorities to check the accuracy of the information, recover debts and to prevent, detect and prosecute fraud. You may also use the information to identify and advise about other services that I may be entitled to or interested in.

If you were referred to this scheme, please specify the name of the person(s), organisation or agency that referred you:

How did you find out about the Hardship Fund Scheme? E.g. Harrow website, the person(s), organisation or agency that referred you:

Signature of person claiming:

Date:

Once you have completed the form please post it to: London Borough of Harrow, Freepost, PO Box 730, Civic Centre, Harrow, Middlesex HA1 2DU or deliver it to the Civic Centre.

**Please complete the monitoring form below.**

**Please note you may be asked to provide suitable ID (e.g. passport or driving licence) if you are asked to come in to collect an award/voucher.**

**This space is for any further information you wish to include as part of your application**

## Monitoring Information

Harrow Council is required by law, Equality Act 2010, to collate equality information. The collated information will not only help the Council demonstrate compliance with the law but also assist the Council to assess the impact of the policies, services and decisions on all the Protected Characteristics covered by the Act and ensure our policies and services are fair and accessible. The information will also enable us to monitor our progress with regards to addressing inequality and allow our employees and service users see how we are performing on equality.

Should you wish to supply the information it will be kept confidential and separate from your consultation response and only be used for statistical analysis.

## Your ethnic group

These are based on the 2011 Census categories but include categories to reflect the communities of Harrow and are listed alphabetically below. Please choose ONE section from A to E then tick or write in appropriate box to indicate your ethnic background

### A. Asian or Asian British

- Afghan     Bangladeshi     Indian     Pakistani  
 Sinhalese     Sri Lankan Tamil  
 Any other Asian background (please write in) \_\_\_\_\_

### B. Black, Black British

- African     Caribbean     Somali  
 Any other ethnic group (please write in) \_\_\_\_\_

### C. Other Ethnic Group

- Arab     Chinese     Iranian     Iraqi     Kurdish  
 Lebanese  
 Any other ethnic group (please write in) \_\_\_\_\_

### D. Mixed

- White & Black African     White & Black Caribbean     White and Asian  
 Any other Mixed background (please write in) \_\_\_\_\_

### E. White:

- Albanian     British     English     Gypsy/Roma Traveller

- Irish       Irish Traveller       Polish       Romanian       Scottish  
 Serbian     Welsh       Prefer not to say  
 Any other White background (please write in) \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Your religion and belief (please tick appropriate box)**

- No religion       Agnostic       Baha'i       Buddhism  
 Christianity     Hinduism       Humanist       Islam  
 Jainism           Judaism       Rastafarian     Sikhism  
 Zoroastrian     Prefer not to say  
 Other (please specify) \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Your sex**

- Male       Female       Prefer not to say  
 \_\_\_\_\_  
 \_\_\_\_\_

**Is your gender identity the same as the gender you were assigned at birth?**

- Yes       No       Prefer not to say  
 \_\_\_\_\_  
 \_\_\_\_\_

**Your sexual orientation**

- Bisexual       Gay man       Gay woman/Lesbian  
 Heterosexual     Prefer not to say     Other (please specify)  
 \_\_\_\_\_  
 \_\_\_\_\_

**Your age**

- 0-15     16-24     25-34     35-44     45-54     55-64  
 65+     Prefer not to say  
 \_\_\_\_\_  
 \_\_\_\_\_

**Do you consider yourself to have a disability according to the terms given in the Equality Act 2010?**

Under the Equality Act 2010 a person is disabled if they have a physical or mental impairment which has a substantial and long term effect on their ability to carry out normal day-to-day activities which would include things like using a telephone, reading a book or using public transport.

Yes     No     Prefer not to say

If "yes" please specify:

- |   |   |
|---|---|
| <input type="checkbox"/> Communication                | <input type="checkbox"/> Learning                     |
| <input type="checkbox"/> Mobility                     | <input type="checkbox"/> Visual/Hearing/Mental Health |
| <input type="checkbox"/> Physical                     |   |
| <input type="checkbox"/> Other (please specify) _____ |   |

**Your marital status:**

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Single             | <input type="checkbox"/> Married / Living Together | <input type="checkbox"/> Civil partnership |
| <input type="checkbox"/> Divorced/Separated | <input type="checkbox"/> Widowed                   | <input type="checkbox"/> Prefer not to say |

**Pregnancy and Maternity: Have you been pregnant and/or on maternity leave in the past two years?**

Yes     No     Prefer not to say

**Caring Responsibilities**

A Carer is someone who spends a significant proportion of their time providing unpaid support to a family member, partner or friend, who is ill, disabled or has mental health or substance misuse problems.

**Do you regularly provide unpaid support caring for someone?**

Yes     No

\_\_\_\_\_

**Some suggested places to get advice & support in the London Borough of Harrow**

<b>Name of Organisation</b>	<b>What they offer</b>	<b>Contact Number/Website/Email/ Address</b>
<b>Housing Benefits &amp; Council Tax Support Enquiries</b>	For full information about how to claim Housing Benefit/Council Tax Support and/or make an appointment to see someone to discuss benefit concerns.	020 8901 2610 <a href="http://www.harrow.gov.uk/benefits">www.harrow.gov.uk/benefits</a>
<b>Jobcentre Plus</b>	Short Term Benefit Advance enquiries	0800 055 66 88
<b>DWP Benefit Enquiries</b>	To access all other benefit enquiries including information to appeal against Employment Support Allowance refusals	0800 88 22 00 <a href="http://www.gov.uk/browse/benefits">www.gov.uk/browse/benefits</a>
<b>Citizens Advice Bureau CAB</b>	The CAB provides advice and help on a wide range of problems from debt to benefits, housing, employment and other legal issues.	020 8427 9477 <a href="http://www.harrowcab.org.uk">www.harrowcab.org.uk</a>
<b>Childcare and Tax Credits</b>	You could get extra tax credits to help you pay for some of your child care whilst you work.	0845 300 3900 <a href="http://www.gov.uk/childcare-tax-credits">www.gov.uk/childcare-tax-credits</a>
<b>Xcite Team</b>	Is the Council's free employment support project offering workshops and 1-2-1 advice on CV writing, interview techniques and job hunting. Contact them for more information.	020 8420 9207 <a href="http://www.harrow.gov.uk/xcite">www.harrow.gov.uk/xcite</a>
<b>Housing Advice</b>	The Council's Housing Advice service helps families to solve their housing problems, such as difficulty in paying your rent/mortgage.	020 8424 1093 <a href="mailto:www.housingadvice@harrow.gov.uk">www.housingadvice@harrow.gov.uk</a>
<b>The Money Advice Service</b>	Offer free, impartial advice and tools which can help you manage your household budgets.	0300 500 5000 <a href="http://www.moneyadvice.service.org.uk">www.moneyadvice.service.org.uk</a>
<b>Turn 2 Us</b>	This charity helps people in financial need to access welfare benefits, charitable grants and other financial help – online, by phone and face to face through our partner organisations.	<a href="http://www.turn2us.org.uk">www.turn2us.org.uk</a>