



# The Cornwallis East Kent Freemasons' Charity

*In Confidence*  
Please use black ink

## **Grant Application Form for Individuals**

*(Please see Guidance Notes)*

The Cornwallis East Kent Freemasons' Charity requires that organisations or individuals may apply for a grant either through mail or email.

Please read the guidance notes before submitting your application.

### **Part 1 – Details of the Applicant**

Full name of person for whom assistance is sought: \_\_\_\_\_

Address: \_\_\_\_\_

Postcode: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Resident in Kent Yes/No If "Yes" for \_\_\_\_\_ years Age \_\_\_\_\_ years

Details of dependents (if any) including ages \_\_\_\_\_

Present employment status \* Employed / Unemployed / Retired / Student / Full-time Carer  
(Circle which is applicable)

Present employer (if applicable): \_\_\_\_\_

### **Part 2 - Income & Expenditure**

Monthly Income £ \_\_\_\_\_

State Benefits (monthly) £ \_\_\_\_\_

Monthly Expenditure £ \_\_\_\_\_

Disposable Monthly Income £ \_\_\_\_\_

**Part 3 - Details of the assistance sought:**

Details of the assistance for which financial aid is sought: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Amount sought      £** \_\_\_\_\_

- Have you applied to the Charity before? **Yes/No\*** If Yes, please provide details on a separate sheet.
- Have you applied to any other charity or organisation for assistance? **Yes/No\*** If Yes, please provide details on a separate sheet.
- I wish to apply to the Charity for assistance, and declare that the particulars given are true.

Signature of Applicant (or agent) \_\_\_\_\_ Date \_\_\_\_\_

***When completed, please return this form to: The Secretary, Cornwallis East Kent Freemasons' Charity,  
11 Boorman Way, Estuary View Business Park, Whitstable, Kent CT5 3SE or email [info@cornwallisekfc.org.uk](mailto:info@cornwallisekfc.org.uk)***

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