



Application for an IPF grant

Please use this form to apply for any grant funding from the IPF and express what is important to you (in an aim to reflect your needs) and to remove the need for many separate forms.

Completed forms will be reviewed by IPF staff before passing to Trustees anonymously to ensure all decisions are unbiased and considered on a needs basis.

Your personal financial information may influence any board decisions on prioritising charity monies; but will not be the sole deciding factor as each individual's needs are different.

Further information may be requested for repeated applications for similar items, or when a large number of applications are made in a short space of time

Guidance notes.

1. Please complete this form for **all** grant requests. If you have not completed a data protection form recently please complete this form also. You can find the data protection form on the IPF website.
2. Please supply as much detail as possible to support your application so we can best meet your needs. If required information is missing, the form may have to be returned for completion, delaying any funding decisions.
3. Please apply for a grant before items are ordered or purchased as we cannot guarantee any funding and you may be left out of pocket if expenditure has been committed. There are exceptions possible for emergencies; please seek further clarification from the IPF in these circumstances.
4. Please give as much relevant information on why this item/project will meet your needs or promote independence for example:
 - a. Why something is needed (e.g. to promote independent completion of tasks)
 - b. Why this specific item/project/expenditure is required (e.g. have you had a similar item on trial or used it before?)
 - c. How this will affect your quality of life
 - d. The difference it will make to you and your family
 - e. How it will help independent living.
 - f. How it will help your carers and dependants.
 - g. Please supply supporting medical evidence where appropriate.
5. If your grant application is successful, please provide the receipts for proof of purchase.



Grant application: Part A - Personal details

(This section is for office use by IPF staff only)

Name of Injured Player		
Date of Birth		
Contact Address:		
Postcode:		
Is this your residential address?	Yes / No	(delete as applicable)
Contact Telephone number		
Email Address		
If you are making an application on behalf of someone else, please state:		
Your name:		
Your relationship to the IPF client:		
That you have their agreement /the authority to make this application on their behalf:		_____ (Signature)
Please supply bank details to allow prompt payment via BACS if this application is successful		
Account name:		
Account Number:		
Sort code:		
Bank Address:		



Grant application: Part B - Details of request

Total amount of grant for all items/projects being requested

£

Itemised costs:

Please list the item(s) or project(s) you wish the IPF to fund and indicate if the cost is estimated or actual (include VAT where applicable)

Item	Cost (£ inc VAT)	Estimate?	Actual?
TOTAL	£		

Please tell us how you feel you will benefit from each of these items/projects should you receive this grant (refer to Guidance note 4 for information). If there is more than one item, please break this down

Have you approached any other organisations for funding or part-funding for any of the listed items/projects?

Yes / No

(delete as applicable)

If yes, please expand on which item and which organisation and their response to date:



Grant application: Part B - Financial Information

Please complete this section for any applications totalling £1,000 or more.

Are you a home owner?	Yes / No	(delete as applicable)
If "Yes":		
How long have you lived there?	Years	Months
Do you own a second property?	Yes / No	(delete as applicable)
Do you have any outstanding mortgage(s)?	Yes / No	(delete as applicable)
How much is outstanding on any mortgage(s)?	£	
How long have you left to pay back on any mortgage(s)?	Years	Months
What is the approximate value of your home today?	£	
If "No":		
Do you rent your home?	Yes / No	(delete as applicable)
Do you live at a family or friend's residence?	Yes / No	(delete as applicable)
Do you live in Local Authority accommodation?	Yes / No	(delete as applicable)
Total personal gross earned income (not including your spouse/partner):	£	per annum
Total unearned incomes, pensions savings and investments:	£	per annum
Amount of any trust fund:	£	
Total state benefit:	£	per annum
Please state any other incomes not listed:	Income:	£ per annum
	Income:	£ per annum
Your calculated total annual living costs:	£	per annum
How many dependants in your direct family do you have? (please state their ages)		