

Application form in respect of persons between 18 and 25 years

TREATED as strictly private and confidential

THOMAS ROE CHARITY

(Registered Charity 309801)

General: The Trustees of the Charity can provide small cash grants in approved cases to or on behalf of persons who have not attained the age of 25 years who are resident in the Parishes of Scaldwell and Brixworth Northamptonshire and who are in need of financial assistance for education purposes subject to the terms of the Scheme, a copy of which is available from the Clerk to the Trustees at Highfield Grange, Highfield Park, Creaton, Northamptonshire. Meetings are held by the Trustees to consider applications bi-annually in March and September. A covering letter setting out purpose for which grant is required must accompany this application.

Particulars to be supplied by student applying for financial assistance

Please state:-

1.	Your name, home address and telephone number:	
2.	Parish in which you reside:	
3.	How long have you been resident within the Parish:	
4.	Date of birth:	
5.	School or other educational establishment previously attended and date of commencement thereat:	
6.	Public examinations passed by you:	
7.	Date of Scholarships or other financial grants made to you or your parents/guardians and value thereof in respect of yourself:	
8.	Total value of savings or other property possessed by you:	
9.	Particulars of your income:	
10.	Particulars of any financial commitment (if any):	
11.	Particulars of any person dependent upon you:	

12.	Full names and address of your parents or guardians if different to you:	
13.	How long have your parents/guardians resided at present address:	
14.	Particulars of any financial assistance given by your parents/guardians to you:	
15.	Purpose for which grant is required briefly (a covering letter is also required):	
16.	Any other relevant information in support of your application:	
17.	Name and address of two referees the Trustees may refer to:	

I HEREBY DECLARE that the information given on this form is a true and complete statement of the whole of the income and capital of myself and I undertake if this application is granted to report any change in the above circumstances.

Signed: (Student)

Countersigned:(Mother/Father/Guardian)

Countersigned: (Trustee)

Date of Application:

You are advised, after completing this application form but before submitting to the Clerk, to contact one of the Trustees of this Charity and to request him or her to countersign the form. A list of the names and addresses of the Trustees is attached.

Completed forms to be sent with covering letter to the Clerk to the Trustees, Mrs U Morris, Highfield Grange, Highfield Park, Creaton, Northamptonshire, NN6 8NT.

The information required is for the Trustees' purposes only and will be treated as strictly "Private and Confidential". The Trustees will not consider the application unless all the questions are answered.