



APPLICATION FORM

SECTION 1—About You

Full Name..... Mr/Mrs/Miss/Ms.....

Address.....

.....

Post Code.....

Telephone No.....

Mobile No.....

Length of time at this address.....

Date of Birth.....

Age.....

Marital Status.....

Employment History: *Please give details of any occupations you have followed and for how long. Any present occupations should be included:.....*

.....

.....

.....

SECTION 2—About your Family

Next of Kin.....

Relationship.....

Address.....

..... Post Code.....

Telephone No..... Mobile No.....



SECTION 3— your present accommodation

Type of Accommodation (*e.g. 3 bedroom house, 2 room flat*):

.....

Do you or your spouse own it? Yes/No

If 'Yes' what is its present estimated value? £.....

If you do not own the property where you currently live, who does own the property?

.....

Is this person related to you in any way? If **YES** what is the relationship?

.....

If rented, please give name and address of landlord:

.....

.....

Current rent: £.....per week

Do you receive Housing Benefit? Yes/No

Do you receive Council Tax Benefit? Yes/No

Why do you wish to leave your present accommodation?

.....

.....

What are your intentions regarding your current property if you are appointed to an almshouse?

.....

If there is a mortgage outstanding on the property and, if so, how much is outstanding? If there is no mortgage please write **NONE**

.....

If you or your partner own property other than the one in which you live, please give details below. This should include property owned abroad as well as in the UK:

Address.....



.....
Post Code

SECTION 4—Your Income

To enable the Trustees to assess your application, please provide the following information. This should include details of all sources of income and state how regularly you receive them, e.g. weekly, monthly or annually:

PENSIONS	AMOUNT	FREQUENCY
State Retirement Pension		
Pension paid by a past employer		
Private Pension		
Widows Pension		
Any other Pension		

SOCIAL SECURITY BENEFITS	AMOUNT	FREQUENCY
Pension Credit		
Attendance Allowance		
Any other Benefits		

OTHER INCOME	AMOUNT	FREQUENCY
Annuities		
Bank Deposit Account		
Building Society Account		
Investments		
Renting Property or land that you own		
Grants from a charity		
Financial assistance from a relative/friend		
From a Trust Fund		
Any other income - please give details		

SECTION 5—Your Capital

- 1. Bank accounts Current Balance
.....
- 2. Building Society accounts Current Balance
.....
- 3. Shares Current Value
.....
- 4. National Savings Certificate Current Value
.....
- 5. Unit Trusts Current Value



.....
6. Premium Bonds Current Value
.....

SECTION 6—Where would you like to live?

Do you wish to be considered for accommodation at:

- 1. Jesse Mary Chambers Almshouses, Tennyson Road
- 2. Sunset Homes, Carlton Street (*ladies only*)
- 3. Caroline Strickland Homes, Hales Road
- 4. Hays Cottages, Naunton Lane
- 5. I would wish to be considered for any of the above

SECTION 7—About your Health & Social Factors

Are you able and willing to look after yourself and your accommodation?

.....

Please give details of any significant illnesses, injuries or operations during the last five years.

.....

.....

Are you receiving continuing treatment for any significant illnesses, injuries etc.:

.....

.....

Are there any other health and social factors that you would wish the Trustees to take into consideration when assessing your application?

.....

.....

SECTION 8—Special Needs



**CHELTENHAM
ALMSHOUSES & AID**

Please list any special aids ie: hand rails, stair lifts etc: that would be necessary for your safety should your application be successful.

.....

.....

SECTION 9—Declaration

I declare that the information given in this application is correct and complete to the best of my knowledge and belief. I accept that if I am appointed as a resident I shall be a beneficiary of the charity and not a tenant. Any weekly sum I pay will be a maintenance contribution and not rent.

I confirm that I am able to look after myself, with the assistance of family and social services if necessary.

Signature.....

Name:.....

(PLEASE PRINT IN CAPITAL LETTERS)

Date:

APPLICATION

Data Protection Statement

It is part of the trustees' responsibilities to ensure that applicants for almshouses are suitably qualified under the terms of the charity's governing document. Trustees therefore need to investigate the personal circumstances of applicants.

The personal data supplied on this form and other information relating to an almshouse appointment or your care management will be held on file. Some details may be checked with relevant organisations but none will be disclosed for any inappropriate purpose.

You may have access to your personal information on re- quest.

Circumstances

If your circumstances change, please inform the Cheltenham Almshouses & Aid office. It may be necessary to complete a new application form. Otherwise, you will be contacted each year to ensure that you wish to remain on the waiting list



**CHELTENHAM
ALMSHOUSES & AID**

If you have any difficulty in completing this form the Cheltenham Almshouses & Aid administration office staff will be pleased to assist you.

The completed form should be returned to: Cheltenham Almshouse & Aid, 6 St. George's Street, Cheltenham, Gloucestershire, GL50 4AF