

Cowan Fund Application Form

Residents Name:

Address:

Residents start date: _____

Project Worker: _____

**Purpose of application (i.e. to cover travel expenses, purchase clothing etc)
please provide details below:-**

I would like to apply for the sum of £_____ **(Maximum £250)**

Please provide breakdown of costs:

- Is the resident positively engaging with the service or support plan: Yes ☐ No ☐
- Does the resident have any outstanding arrears: Yes ☐ No ☐
- If Yes, what are the arrear repayment plan details:

I can confirm I have:-

- I have exhausted all other forms of funding ☐
- I have not made an application to the fund more than twice in a financial year (i.e. 1st April – 31st March) ☐
- I will provide feedback (which I understand may be used for marketing purposes) on my experience of accessing the fund, giving details on how this has assisted me ☐

Signed: _____ Date: _____

For office use only:-

Application supported by Manager: Yes ☐ No ☐

Date submitted to Head of Housing: _____

OUTCOME

***Reference No: _____ (Service/Year/Application Number
e.g. Don/14/02)***

Approved ☐ Declined ☐ Date Approved _____

Feedback/Outcome (Please state how the funds have assisted the resident)
