

THE THREE OAKS TRUST

Application Form for Professional Workers to use on behalf of SCAMPPS members

This form is to be downloaded, completed electronically and emailed to: louise@scampps.org.uk for forwarding to The Three Oaks Trust. Please include any attachments referred to in the application, including any SCAMPPS application already submitted

1. Name(s) of Child with birth date(s): *If this information is particularly sensitive then use only initials and dates of birth.*

2. Address of child:

If this information is particularly sensitive then omit address, but please give location including borough.

3. Name of main parent contact, mobile number and email address:

4. Ethnic group:

5. Name of professional submitting request:

6. Occupational Role of (5) above:

Relevant training or qualification of the above professional: eg: CQSW, MA, NVQ, GCSE's and/or years of experience working in relevant area

7. Address for correspondence:

8. Professional's Tel no and hours when contactable – either landline or mobile:

9. Professional's email address:

10. How long has the child /family been known to you or your agency?

11. Brief Description of the child and family's situation. What support is the child and family receiving from family members, friends and local professional services? What is the child's diagnosis?

12. Details of Item for which funding is requested (include weblink or quote where applicable):

13. Contact details of Consultant/Therapist supporting the application. *Please confirm that you have given your Consultant/Therapist permission to speak to the SCAMPPS Clinical Therapist Sharon Gosling to discuss this application further if necessary.*

Signature of parent/ guardian

14. Expected benefit for the welfare of the child or family members:

15. Details of the financial situation of the child's family i.e. income and outgoings including savings, mortgage/rent payment, other bills, Motability car, statutory benefits and special allowances. Are grandparents, estranged parents or others willing/able to provide any financial help towards this request?

16. Details of other donations made by charities to the child or family over the last 3 years and any outstanding applications: *(Three Oaks Trustees recognise that multiple applications are normal but would wish to know how many other Trusts are being approached for this request)*

17. Please provide details of funds raised to date for the purpose of this request:

Statutory sources:

Other:

Total:

18. Amount requested from The Three Oaks Trust:

19. Payee Details:

Grant will be paid to SCAMPPS for purchase of the equipment.

20. Date of Application:

Pam Wilkinson and Denise Chandy, Trustees, Three Oaks Trust will be dealing with the applications from SCAMPPS. Their contact details are available from SCAMPPS if needed.