



# SIR JOHN CASS'S FOUNDATION

The Education Charity for London

**Sir John Cass's Foundation**

**Initial Enquiry Form for Individuals**

**Sir John Cass's Foundation**  
31 Jewry Street  
London EC3N 2EY

**T:** 020 7480 5884  
**E:** [contactus@sirjohncass.org](mailto:contactus@sirjohncass.org)  
**W:** [www.sirjohncassfoundation.com](http://www.sirjohncassfoundation.com)



# SIR JOHN CASS'S FOUNDATION

The Education Charity for London

Please read our [Guidelines for Individuals](#), and [Individual Grants: Priorities for Grant Making](#) before completing this form.

Sir John Cass's Foundation operates a two-stage application process. Individuals applying for a grant should complete this form and send or email it to us **together with a two page description and an outline budget**.

We will consider your enquiry and will reply within three weeks to let you know whether or not your application meets the Foundation's grant giving priorities. If it does, and the Foundation is interested in pursuing to full application stage, you will be invited to submit a full application and will be sent a copy of our **Stage 2 Application Guidelines for Individuals**.

Our two stage process gives you the opportunity to enquire about making an application to the Foundation without the need to submit a full application. Applying for funding is a time consuming process and our initial enquiry stage aims to save you the time and effort of making a full application where the Foundation is unable to assist because of the limit of our grants budget or because an application does not or only partially meets our priorities.

## About you:

Name: \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ Post code \_\_\_\_\_

**The reasons behind your application.** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



# SIR JOHN CASS'S FOUNDATION

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## Summary Project Description & Budget

Please include a summary outlining the funding you are seeking; its aims, outputs and outcomes; and outline budget. Please limit your project description to two pages of A4.

When will your project start and finish? Begins \_\_\_\_\_ Ends \_\_\_\_\_

Duration of the grant you are seeking ^ Less than one year ^ 1-2 years  
^ 2-3 years ^ 3 years +

Amount you wish to apply for £

Total cost of your application £

In which inner London borough do you live? ^ Camden  
^ City of London  
^ Greenwich  
^ Hackney  
^ Hammersmith & Fulham  
^ Islington  
^ Kensington & Chelsea  
^ Lambeth  
^ Lewisham  
^ Newham  
^ Southwark  
^ Tower Hamlets  
^ Wandsworth  
^ Westminster  
^ Other (please specify)

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# SIR JOHN CASS'S FOUNDATION

The Education Charity for London

## How you heard about us

How did you hear about the Foundation?



Advert  
Another funder  
Foundation leaflet  
Foundation website  
Funding directory  
Received funding before  
Word of mouth  
Other (please describe)

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Have you received funding from the Foundation before?



Yes, within the last 5 years  
Yes, but more than 5 years ago  
No

Signed \_\_\_\_\_ Dated \_\_\_\_\_

Name of signatory \_\_\_\_\_

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London EC3N 2EY

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# SIR JOHN CASS'S FOUNDATION



## INDIVIDUAL GRANTS 2016/17 ACADEMIC YEAR

Please read the accompanying guidance notes to check you are eligible to apply before completing this application form.

Please answer every question on this and the **two** attached forms concerning Ethnicity and Disability Monitoring and the Data Protection Act and please write clearly in black pen.

The Foundation's staff will be happy to give you advice if you have any questions about whether or not you are eligible to apply, filling in the form or the documents you need to send us.

Our telephone number is **020 7480 5884** and the office is open Monday to Friday 9.30am - 5pm

### ABOUT YOU

Title: Mr, Mrs, Miss, Ms      First name/s      Family / Last name

--

Address:

Date of birth:

Age:

Place of birth:

Nationality:

National Insurance No.

London Borough:

Length of time at this address:

If less than three years, please provide details of the other addresses you lived at in the last three years, including the dates you lived there:

Phone number:

Email address (please write clearly!)

Mobile number:

Your parent/s' or guardian/s' address if different from your own:

Do they live or work in the London Borough of Tower Hamlets or the City of London? If so, how long have they lived or worked in this area?

Do you live in a:	One parent home	Two parent home
or:	With guardian/s With friends	By yourself With a partner or spouse
Number of brothers and sisters:		Their ages:
How many are still in education:		

If you have children please tell us

How many children you have:	How old they are:
Are you a single parent?	

**YOUR EDUCATION SINCE THE AGE OF ELEVEN**

**Secondary Education**

From	To	Name and address of school(s) and/or college(s)	Subjects studied	Qualifications/Grades

**Further and Higher Education**

From	To	Name and address of college(s) and/or university	Subjects studied	Qualifications/Grades

**YOUR COURSE**

Course Title:	Length of course:
	Starts:                      Finishes:
	Number of hours per week:
Name and address of school, college or university where you are studying:	
Name of course tutor (if known):	

What are you hoping to do once your course has finished? (e.g. further study, work)

What profession or occupation are you hoping to go into?

### YOUR FINANCES

#### Current and previous employment, voluntary work and work experience

From	To	Position/Job Title	Name of Employer	Type of employment <small>paid, voluntary, work experience</small>

If you are currently working please tell us

Where you work:

Hourly rate:

How much you earn (each week/month):

Hours worked per week:

Please tell us about any voluntary work you listed above

#### Other Charities, Trusts and Foundations you have applied to

Name of organisation	Date applied	Result, if known

**Your parent(s)', guardian(s)' or partner's income**

Please list all the income your parent/s, guardian/s or partner/spouse receives (including wages, different types of benefits, maintenance payments etc)

Who e.g. mother, partner etc	Type of income e.g. salary, pension, benefits	Amount they get e.g. per week or annually

**Your Income and Outgoings for the academic year for which you are seeking funding**

Income	Weekly	Yearly	Expenses	Weekly	Yearly
Student Grant			<b>Living Costs</b>		
Student Loan			Rent/Accommodation		
Fee Loan			Food		
College or Uni bursary			Household Bills		
EMA (Education Maintenance Allowance)			Telephone		
ALG (Adult Learner Grant) *					
Access to Learning Fund			Childcare		
Hardship/Travel Grant			Other (please say what)		
Career Development Loan					
Bank Loan/Overdraft			<b>Total</b>		
<b>State Benefits - e.g. Job Seekers Allowance, Disability Living Allowance, etc</b>			<b>Education Costs</b>		
Child Benefit			Course Fees		
Housing Benefit			HE Tuition Fees		
Other Charities			Enrolment and Exam Fees		
Savings			Travel		
Employment (work)			Equipment and books		
Contribution from parents or other family			Lunches at college/uni		
Other (please say what)			Other (please say what)		
<b>Total</b>			<b>Total</b>		

\* ALG (Adult Learner Grant) is currently being piloted in west London but is due to be rolled out nationally from 2007/08

If you applied for Education Maintenance Allowance, Adult Learner Grant, to your local education authority for a Student Loan and Grant or to your college or university's Access to Learning Fund and were turned down, please tell us the reason they gave you for not funding you:



**ABOUT THE GRANT YOU ARE REQUESTING**

The amount of funding you are asking us for: £

Why you need the grant:

**OTHER USEFUL INFORMATION**

How you heard about Sir John Cass's Foundation

If there is any other information about your circumstances it would be useful for us to know or that you want us to take into account when assessing your application, or if there are any achievements you are proud of and would like us to know about please, use the box below or attach a separate sheet of paper to this form.

**DECLARATION**

I declare that the above particulars are correct and truthful, and understand that providing false information is an offence that may lead to disqualification and prosecution.

Signed .....

Dated .....

**IMPORTANT:** Please ensure you also sign and return the Data Protection Act form : we cannot process your application without your consent!  
Applications with unsigned Data Protection Act forms will be returned.

## DOCUMENTS YOU NEED TO SEND US WITH YOUR APPLICATION

Please enclose photocopies of the following:      **Please DO NOT send us original documents**

- your birth certificate
- if you were born outside the UK, a copy of your passport (including, if relevant, the pages showing your Home Office stamp)
- proof of your parents'/guardian's/partner's income (wage slip, copy of P60, benefit books or giro cheques, child benefit books)
- proof of your own income
- one reference from a current or recent academic tutor
- a second suitable reference. (for example UCAS, employer or other independent person)

### **Plus** the following information about student funding

#### Sixth Form & Further Education students:

- notification letter showing how much EMA or ALG you receive
- correspondence regarding any applications you have made for Access to Learning Funds or other grants from college funds (e.g. travel grant)

#### Higher Education students:

- your latest local education authority assessment letter showing how much Student Loan and Grant you are entitled to receive
- correspondence regarding any applications you have made for Access to Learning, Hardship funds or other college awards - e.g. scholarships or bursaries
- your HEBSS (Higher Education Bursary & Scholarships System) form\* OR
- information from your university showing your bursary entitlement

#### Postgraduate students:

- proof of your degree result (certificate, official transcript, notification slip etc)
- your most recent LEA assessment letter (from your final year of undergraduate study) and latest Annual Statement from the Student Loans Company
- correspondence regarding any applications you have made for Access to Learning funds or other college awards - e.g. scholarships or bursaries
- correspondence regarding any other funding you have applied for e.g. Career Development Loan, Research Councils etc.

Post your completed form with the documents listed above to:

**Mr Richard Foley, Deputy Clerk/Deputy CEO**  
**Sir John Cass's Foundation**  
**31 Jewry Street**  
**London EC3N 2EY**

**Tel. 020 7480 5884**

## DATA PROTECTION ACT FORM

### *Please read this very carefully*

It is a necessary part of the application process that we have to ask you for personal information, for instance about your background, finances and family. The Data Protection Act exists to make sure that organisations treat people's information confidentially and do not misuse such information. To comply with the Act we need to have your consent to hold information about you on our computer and paper files.

### **What we will do with your information**

- Once we have received your application (and a signed Data Protection Act form) we open a case file. Any information you or other people send us about you is put on your file and this is kept in a lockable filing system.
- Brief summaries of the information on the file and any letters or reports we write are kept on our computer system.
- We will not keep your information any longer than we need to. Your file will usually be shredded within seven years of our last contact with you (which is legally how long we have to keep the information). Most of the information held on computer will be destroyed at the same time.
- The majority of education charities, trusts and foundations (including us) share some very basic information (i.e. name, course details, amount awarded or date declined) with each other about the people they receive applications from. This helps us avoid fraud and to ensure someone is not receiving multiple grants.

### **Other people you have to tell us about**

Your application will contain personal information not only about you but also possibly about other people, for example your parents or partner. If this is the case please show this form to the people involved, and make sure they agree we can store and use their information in your file.

Sometimes you may not want to show this form to others or obtain their consent, e.g. a violent or unhelpful ex-partner, young or vulnerable children, or there might be others with whom you have lost contact. We would not expect you to obtain their consent in such cases. Please just let us know who they are.

Please be assured your information is safe with us, and will not be used for any purpose other than your application for financial assistance.

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I consent to the Foundation holding and processing information about me and my family on its computer and paper files, and authorise it to contact other funders as outlined above and, where necessary to liaise with schools or colleges that I have previously attended, am currently attending or hoping to attend, and to discuss my application with them and/or pass relevant information to them as appropriate.

Name of Applicant

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Signature of Applicant

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Date

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Name(s) of other(s) giving consent

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Signature of other(s) giving consent

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Date:

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Names of anyone mentioned who has not been asked to consent:

# SIR JOHN CASS'S FOUNDATION

ESTABLISHED 1748



## INDIVIDUAL GRANTS 2016/17 ETHNICITY/DISABILITY MONITORING

We would be grateful if you would complete this form indicating which of the following options best applies to you. This form helps the Foundation ensure it is receiving applications from all sections of the community. Information you provide is for monitoring purposes only and is not used in the assessment of your application.

Family / Last Name \_\_\_\_\_ First Name/s \_\_\_\_\_

I am: Female  Male

Nationality \_\_\_\_\_ Date of Birth \_\_\_\_\_

I would describe my ethnic origin/heritage as (please tick):

- Black, African heritage
- Black, Caribbean heritage
- Black, Other
- Bangladeshi
- Indian
- Pakistani
- Asian, Other
- Mixed Race
- White, European
- White, UK heritage
- White, Other
- Any Other Ethnic Group - e.g. Turkish, Iranian etc
- Prefer not to say

I am dyslexic Yes  No

I have a disability other than dyslexia Yes  No  I am registered disabled Yes  No

### DATA PROTECTION ACT

I agree that the information given on this form may be processed by the Foundation in accordance with the Data Protection Act, in particular, for the purpose of equal opportunities monitoring. I agree to the storage of this information on manual and computerised files and understand that this information is used for monitoring purposes only.

Signature \_\_\_\_\_ Date \_\_\_\_\_