RSSWS Application Form



About the woman applying for support			
1 - Full Name		2 - Title	
3 - What name would you prefer us to us	e when speaking or writing t	o you (eg, if your	
name is Mrs Pamela Smith, you might pre	fer to be called Mrs Smith, Pa	imela or just Pam)?	
4 - Phone No	5 - Email (please only use yo	urs)	
6 – What is your date of birth?			
7 - Home address (please include your po	estcode)		
8 - What is the best way for us to contact	t you (please circle ALL that a	oply)	
Email	Post	WhatsApp	
Phone	SMS		
9 - Please use this box to tell us about w		•	
so, from whom), do you own your home (and if so, do you have a mortgage), do you have a shared ownership arrangement, do you live with family or friends, etc?)			
silared ownership arrangement, do you ii	ve with failing of friends, etc:	1	

About Your E	ligibility			
The Society's R	oyal Charter states that we can only support single women, aged 50 or over,			
and who have l	and who have lived in Scotland for at least the last 2 years. The following questions are			
important to he	elp us to assess if you meet these criteria.			
10 - Does anyo	ne live with you (even if only part-time)? Please circle ONE and add details			
if required.				
	* If YES, please use this box to tell us who lives with you, how old they are			
No	what their relationship is to you and how often they stay with you.			
Yes*				
163				
11 - How long	have you lived in Scotland? Please circle ONE and add details if required.			
	*If LESS THAN 5 YRS, please use this box to tell us when you moved to			
All your life	Scotland, why you did so and where you were living before.			
More than 15				
years				
Between 5				
and 15 years				
,				
Less than 5				
years*				
42	TVED become and device of the standard NO Discoveried ONE and add			
	EVER been married (or in a civil partnership)? Please circle ONE and add			
details if requir				
No	*If YES, please use this box to tell us how your marriage / partnership			
NO	came to an end. Did your spouse / partner die, did you get a divorce, did			
Yes*	you make a written separation agreement or did your marriage /			
	partnership end some other way (if so, please explain)?			

About your financial circumstances				
The Society has limits on the amount of savings and income you can have in order to				
qualify for our support. As part of our assessment of your application we will need to ask				
you for details	of your financial circumstances, but at this point in the process we are just			
	general information.			
	ately how much money do you have in your bank account(s)? If you have			
	account, please tell us the total for ALL your accounts. Please circle ONE			
and add details	·			
Less than	Are there reasons why the total in your bank account(s) is higher than			
£10,000	normal, or do you have significant bills that you need to pay? If so, we may			
110,000	be able take this into account.			
Between				
£10,000 and				
£24,000				
Over				
£24,000				
14 - Do you ha	ve any investments or other assets (for example shares, premium bonds,			
other bonds, e	tc)? Please circle ONE and add details if required.			
	*If YES, please tell us about these and give us an approximate value.			
No				
Yes*				
.00				
15 Do you ou	n any property or land (not including where you normally live)? Please			
•	add details if required.			
CITCLE OIVE ATIO	·			
No	*If YES, please tell us about this property, give us an approximate value			
	and let us know if there are any reasons why it would be difficult to sell.			
Yes*				

16 - Please tell us if you receive ANY of the following benefits / types of income /	
pensions? Please tick ALL that apply.	
State Retirement Pension	
Pension Credit	
Personal / Works / Occupational pension	
Attendance Allowance / PADP	
Universal Credit	
ESA	
Carers Allowance	
Salary / Wages / Self-employed earnings	
DLA / PIP / ADP	
A Motability Car	
Child Benefit	
Grant from another Charity (please add the Charity(s) name below)	
17 – Please tell us about any other kinds of income you receive (eg child support,	
18 - Do you have any loans / debts or are there particular bills you are struggling to If so, please tell us about ALL of these and tell us about any help or advice you have received to deal with them. If not, please answer "None" to this question.	pay?

19 - If you have had problems with debts, are you subject to a Trust Deed, Bankruptcy or
Insolvency Agreement (or are you likely to be in the near future)? If so, please provide
details. If not, please answer "No" to this question.
About why you are applying for support.
20 - In your own words, please tell us about what has happened in your life over the past
few years that has led up to you applying to the Society for support. Please continue on
a separate sheet if you need to. The more you can explain to us, the easier it is for us to
understand your situation.
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21 - Who told you about the Society or how did you first find out about us? Plea	sa tick
the ONE that best applies.	SE LICK
Internet Search (please add details below)	
Advertisement (please add details below)	
Social Work / Social Care staff	
Job Centre / Benefits staff	
CAB / Advice Service staff	
NHS Staff (inc Macmillan or Maggie's Centres)	
Housing Association / Dept	
Another Grant-making Charity (eg RSABI) (please add details below)	
Other (please add details below) 22 - Please add details of how you found out about us (eg if you saw an advertise	
please tell us where you saw it, if you found us on the internet, tell us which webs	ite, etc).
Referrer details	
If you have been helped with this form, it can be very helpful to know the contact	details of
the person who helped you in case questions arise while we consider your applica	
A - Please give your (i.e. the referrer's) name, email and phone contact details ar	
B - Please sign and date to consent to us holding you details (see our Privacy Polidetails)	cy for
Supporting documents	
We need to see information to support your application so please send us the following	owing.
Copies are fine, but if you send us original documents, we will return these to you	by post.
If you do not send us these documents, it will slow down our consideration of you	r
application. Please tick each box to confirm you have enclosed the documents rec	uested.
Bank statements for ALL your accounts showing the transactions for the most	
recent 3 MONTHS that you have statements for.	
If you were divorced or formally separated, a copy of your divorce certificate or your separation agreement.	
A copy of your Birth Certificate or a <u>copy</u> of an alternative form of ID which	
confirms your Date of Birth (such as Driver's Licence or Passport – please do NOT send us originals of these as we cannot guarantee their arrival).	
A copy of your latest Council Tax Bill	

Declaration		
It is important that the Society has a complete and accurate understanding of your		
personal and financial circumstances so that we can apply our policies in a fair and		
consistent manner when deciding whether we can offer you support. It is also import	ant	
that you understand aspects of the way the Society works. Please tick to confirm each	n of	
the following and then sign and date this application.		
The information I have provided, and any information I will provide in the course		
of the Society's assessment of my application, is both complete and accurate.		
I understand that all support from the Society is made at the Trustees'		
discretion. I recognise that this means that while the Society is pleased to be		
able to support women, it is under no legal obligation to do so and the Society's		
support may change or end if there is a change in my circumstances or indeed in		
the Society's.		
I have been made aware of the Society's Privacy Policy which outlines the care		
that the Society takes with my personal data and the way that it will use this. I		
acknowledge that the Society may update this policy from time to time and I		
know that I can find a copy of the most up-to-date version on the Society's		
website or they will send me a copy of this if I ask them to do so.		
Signature		
Signed Date		

Please now:

- Make sure you have completed all sections of this form
- Make sure you have included the supporting documentation we have requested
- Return this form (and the supporting documents) to:
 RSSWS, 160 Causewayside, Edinburgh, EH9 1PR
- Complete the final section on the following sheet.

Farrel area autor	- '			
•	nities Informatio			
•	•	ng support in a fair a		
	· ·	I. You do NOT have		<u> </u>
•		ndards if you do so.		
monitoring ONLY	and are NOT includ	ded in the informati	ion we use to make	e decisions.
23 - How is your h	nealth in general?	Please circle ONE.	,	
Very Good	Good	Fair	Bad	Very Bad
24 - What is your	country of birth?	Please circle ONE a	and add details if ne	eeded
		*If ELSEWHERE, p	lease give the curr	ent name of the
Scot	land	country you were	born in.	
Engl	land			
Liigi	idild			
N Ire	eland			
\\\\\	Jac			
VVa	Wales			
Elsew	Elsewhere*			
25 - What is your	ethnic group? Ple	ase tick ONE		
White - Scottish				
White - British				
White - Irish				
White - Other				
Mixed or Multiple	Mixed or Multiple			
Asian (inc Scottish or British Asian) – of Pakistani, Indian, or Bangladeshi heritage				
Asian (inc Scottish or British Asian) – of Chinese heritage				
Asian (inc Scottish or British Asian) – of Other heritage				
African (inc Scottish or British African)				
Caribbean or Blac	k			
Other Ethnic Group				