

Arvon Low Income Grant Application: The David Pease Fund 2024 Residential Courses or Arvon at Home

Section 1 Eligibility

| Name | |
|------------------|--|
| Date of birth | |
| Email | |
| Address | |

| Eligibility | Tick |
|--|------|
| I am resident in the UK , aged 18 or over and have not received a previous course grant from Arvon (see <u>terms and conditions</u>) | |

Section 2 Course Booking & Grant Details

If you are making a grant application, you should reserve a place on your chosen course beforehand. Your place will be held until we receive and assess your grant application. The application should be returned within 7 days of booking.

Book online at <u>www.arvon.org</u> and select the option to apply for a grant.

Course you have booked :

| Course title | |
|-----------------------------|--|
| Course start date | |
| Writing House (state which) | |
| or Arvon at Home (online) | |



| Tell us how much you are applying for. <u>Please only request the amount that</u> <u>you actually need.</u> | Amount: |
|---|---------|
|---|---------|

Section 3 Financial Information

| Are you receiving any state benefits? | Yes / No |
|---------------------------------------|----------|
| | |

If **no**, please answer the following:

| Annual household income (Total joint income if you have a partner) | |
|--|----------|
| Amount held in savings (Total joint savings if you have a partner) | |
| Number of dependents (Include children or dependent adults) | |
| Employment status (e.g. full-time / part-time / temporary / self-employed / unemployed / student / retired) | |
| Do you have any specific access requirements? (If so, please give details in the 'other information' text box below) | Yes / No |



Please give any other information that would help us to understand your financial position better:

Financial info cont.

Section 4 Supporting Documents



If you are not in receipt of state benefits, you must send documentary evidence to fully illustrate your household's financial situation and thereby demonstrate that you do not have the financial means to cover the full cost of an Arvon course.

Evidence should include bank statements - or some other form of verifiable documentation - from the past 3 months which clearly illustrate your household outgoings and any savings. We try to be as flexible as possible when considering grant awards, and the more evidence/explanation we have, the more likely we are to be able to help.

Please post photocopies of documents, or email scanned versions, as we cannot return originals. Applicants are encouraged to blank out sensitive information, such as account numbers and sort codes, so long as it is clear the documentation refers to them personally.

If you **are** in receipt of state benefits, please give details including copies of benefit letters with your completed application.

This can include:

- Proof of means-tested state benefits (such as housing benefit, council tax benefit, Universal Credit, Income Support, pension credit, Job Seeker's Allowance, or other similar benefits)
- Proof of Disability Living Allowance or Personal Independence Payment

Section 5 Personal Statement

Please use this section to tell us why you want to do an Arvon course. You should describe how attending the course will help you as a writer, and what you hope to achieve through the experience. (300 words max)



Section 6 Additional Access Support

As well as support for course fees, we have a limited amount of funding earmarked to support writers with additional access needs. This funding is for writers whose access needs would result in additional costs, not incurred by a writer without those needs. If you feel you would qualify for extra financial support, please outline your requirements below. As a guide, we will support expenses such as travel costs over and above a standard journey, eg the price difference between a fully accessible taxi and a standard fare but, regretfully, we do not have the means to cover major costs, such as a BSL interpreter (although, in most cases, if you need to bring a PA with you on a residential, we can provide room and board at no additional cost). For more access information please visit https://www.arvon.org/centres/access-information/ and please do get in touch if you have any questions.



Please include a quote or estimate with your request.

Section 7 Equal Opportunities and Writing Questionnaire

To help us gather information on the impact of the grant fund and report to funders, it would be really helpful if you could complete our <u>online equal opportunities and</u> <u>writing questionnaire – click here</u> Your responses are entirely confidential and will not be considered as part of your grant application.

Section 8 Confirmation

I confirm that:

| | Tick |
|--|------|
| I agree to the terms and conditions of Arvon's grant scheme | |
| I have completed the Equal Opportunities and Writing Questionnaire | |

| Signature (typed or handwritten) | |
|----------------------------------|--|
| Date | |



Please return your completed application form, with supporting documents, by email to: grants@arvon.org

Please note, applications can only be submitted by email.