| - | Marital □ Living costs □ Medical □ Emp | loyment Edu | ucation Other |
|--|--|----------------------------------|-----------------|
| Presbyterian Children's Society | Glengall Exchange, 3 Glengall St, Belfast Tel: +44 (0)28 9032 3737. Email: info@pr | | renssociety.org |
| EXCEPTIONAL GRANT APPLICATION FORM | | [Office Use Only] [Received:] | |
| About the Applicant | | [Grant:] | |
| Surname: | | Title: Mr / | Mrs / Miss /Ms |
| Christian Name(s): | Congregation | n: | _ |
| Cheque Payee Name: | | | |
| Number of children/young pe | eople under 23 in full/part time educa | tion or pre-so | chool: |
| Is the family currently receivi | ? | Yes / No | |
| If the family is not receiving a Regular Grant, would you like an application form for a Regular Grant sent to you for completion? | | | Yes / No |
| whose behalf the application is | w the purpose of the grant and the circle being made (continue overleaf if requir | red). | • |
| | etween £1 and £600 you wish to be con | , | certify the |
| | er the pastoral care of the Presbyterian | | • |

The Presbyterian Children's Society is subject to the General Data Protection Regulation. This means we treat personal information confidentially regarding any matter pertaining to grant administration and use it for this sole purpose.

Date

NAME OF MINISTER (PRINT NAME) Signature of Minister