



**THE  
AMBULANCE  
STAFF  
CHARITY**

Caring for those  
who care for us

## Application for financial support

Please read the notes below carefully before completing the application form.

Your application can not be considered until we receive your completed form. The information you provide will be treated as confidential and in line with General Data Protection Regulation (GDPR).

Please provide as much detail as possible to help us fully understand your circumstances and enable us to recommend the most appropriate support option for you.

### Can we help you?

We will only consider applications from people who satisfy the following criteria:

- **Must be in need and any assistance given must be beneficial to the individual**
- **A UK resident who has worked within the UK, UK dependencies or Gibraltar. Apart from the dependencies and Gibraltar, support is not offered to overseas applicants or their dependents. Overseas work is not included within the minimum 12 months service requirement**
- **Have no more than £4,000 in savings**
- **Are receiving, have applied for or will be applying for, any statutory benefits which you may be entitled to**
- **Be an NHS ambulance service or a CQC-regi stered independent/private ambulance service for at least 12 months (can be currently serving or retired)**

We will also consider applications from spouses, widowed partners, children and other dependents of current or former ambulance staff who have served for at least 12 months, or students in a Paramedic Science course from year 2 onwards.



**To support your application, you will also need to provide at least two months of payslips and bank statements for you and your partner.**

- **If you are applying for a grant to purchase equipment or services, you will also need to provide details of the supplier and quote for the item or service**
- **If you are applying for specialist equipment, such as a wheelchair, you will need to provide the above and an assessment from an Occupational Therapist, Physiotherapist or GP indicating that the equipment is suited to your needs**

**Please note that we cannot process your application until we have received both your completed form and your supporting information.**

## **Submitting your application form**

Please return your completed application form and supporting information to [applications@theasc.org.uk](mailto:applications@theasc.org.uk), alternatively send your printed application form to:

TASC Wellbeing Support Team  
TASC, The Ambulance Staff Charity  
12 Ensign Business Centre, Westwood Way  
Coventry, CV4 8JA

If you have any queries or require assistance to complete the form, please call the Wellbeing Support Team on 0800 1032 999 or email [support@theasc.org.uk](mailto:support@theasc.org.uk).

## **What happens next?**

Once we have received your completed form and supporting information, a member of our team will be in touch to discuss your application and support needs. If you have any questions in the meantime, please email [support@theasc.org.uk](mailto:support@theasc.org.uk)

Unless otherwise indicated, please complete all the sections in this form.

## Section 1 - Referrals

Are you filling in this form on behalf of someone else?

Yes

No

If you selected 'No' above, please skip to Section 2 – your personal details.

If you selected 'Yes' above, please enter **your details** below.

First name		
Surname		
Your relationship to the individual this form is about		
Email address		

Please re-enter your email address in the box below.

--

The remaining questions in this form are about the person in need of support.

The remaining questions in this form are about the person in need of support.

## Section 2 – your personal details

Are you a resident in the UK or a UK dependency?

Yes

No

Please select from one of the following:

I have served in an ambulance service for at least 12 months

I am a family member of someone who is serving or has served in an ambulance service for at least 12 months

I am a student in year 2 of a Paramedic Science course

I have been volunteering with a UK ambulance service for at least three years

If can't select one of the options above, then we may not be able to help you at this time. For more information, please visit [www.theasc.org.uk/who-we-help](http://www.theasc.org.uk/who-we-help) or call **0800 1032 999** for more information.

Mr

Mrs

Miss

Ms

Other

First name	
Surname	
Maiden name	
Date of birth	

What is your current civil status?

Single

In a relationship

Married

Civil partnership

Divorced

Widowed

Separated

### Contact details

Address	
Postcode	
Telephone	
Mobile	
Email address	

Please re-enter your email address in the box below.

--



## Section 4 – your employment

To help us identify if there are any additional support organisations you may be eligible for, for example if you served in the military, we need you to tell us about your employment history.

Please select one of the following:

I am currently in work

I have ceased work due to retirement

I have ceased work due to ill health

I have ceased work for another reason

### Current employment details

Please include the current employment details for **every adult in your household**, including your spouse/partner, children and housemates. If you are currently not working, please enter the details of your most recent employment.

Name	Employer	Position held	Dates to/from

### Previous employment details

Please include **your** previous employment details.

Employer	
Position held	
Dates to/from	

Employer	
Position held	
Dates to/from	

Employer	
Position held	
Dates to/from	

Employer	
Position held	
Dates to/from	

Employer	
Position held	
Dates to/from	

Employer	
Position held	
Dates to/from	

Employer	
Position held	
Dates to/from	

Have you served in the armed forces? Yes  No

If you selected 'Yes' above, please provide your service number, details of the years you served and the branches you served in:

--

Are you a member of a trade union? Yes  No

If you selected 'yes' above, your trade union and membership number below:

Union name	
Union number	

## Section 5 – your income, expenditure and savings

To give us a clear picture of your monthly cash flow, please provide details of you **and** your partner's monthly income and expenditure below.

Income		You	Your partner	Total
Earnings				
State pension				
Occupational pension				
Pensioner's tax credit				
Maintenance/child support (from ex-partner)				
Universal credit				
Child benefit				
Employment support allowance				
Statutory sick pay				
Personal independent payment				
Attendance allowance				
Carer's allowance				
Council tax reduction				
Other please specify				
Other please specify				
Other please specify				
Other please specify				
Other please specify				
Other please specify				
Other please specify				
Other please specify				

Your income	Your partner's income	Your total income



<b>Expenditure</b>	<b>You</b>	<b>Your partner</b>	<b>Total</b>
Rent (what you pay)			
Mortgage			
Council tax			
Gas			
Electricity			
Water			
Telephone – landline			
Telephone – mobile			
TV and internet packages			
TV licence			
Food and housekeeping			
Clothing			
Prescriptions, and healthcare items			
Car running costs (petrol, tax and insurance)			
Travel fares (bus, train and taxi)			
Child care costs			
House insurance			
Life insurance			
Other please specify			
Other please specify			
Other please specify			
Other please specify			
Other please specify			
Other please specify			
Other please specify			

<b>Your expenditure</b>	<b>Your partner's expenditure</b>	<b>Your total expenditure</b>

## Your savings

Do you or your partner have any capital, savings or investments?

Yes

No

If you selected 'yes' above, please provide details of all your accounts below and provide a copy of your last two months of statements as supporting evidence.

Account	Amount

## Your debt and liabilities

Please include details of your debts including, credit cards, loans, loans from family members, hire purchases and deferred payments below.

Purpose of the loan	Name of lender/creditor	Amount outstanding	Monthly payment

## Section 6 – your accommodation

Please select one of the following:

Home owner

Sheltered accommodation

Private tenant

Residential/nursing home

Housing association/local authority tenant

No fixed abode

## Section 7 – your financial wellbeing

To help understand your current situation, how we can help and the best solution for you, we need you to fill in the questions below to provide details on how you're currently feeling and what support you have already received.

### What is your current situation?

For example, have you had a reduction of income or an unexpected expenditure, are you struggling with your debts or are you in need for specialist equipment to support your wellbeing?

### What steps have you already taken to resolve the issue?

For example, have you spoken to your creditors or tried to reduce your outgoings?

Have you approached any other organisations, local authorities or charities for support? If so, please provide details of the organisation, the support you applied for and their response.

How are your finances affecting your day-to-day life?

What support would you like to receive from TASC?

If you would like to tell us anything else about your financial wellbeing, or if your mental health is suffering due to your finances, please include details here.

A large empty rectangular box intended for providing details about financial wellbeing or mental health issues.

## Section 8 – About TASC

How did you hear about TASC?

Employer	Manager	Colleague
Friend	TASC volunteer	Poster/leaflet
News article	Website	Online search
Facebook	Twitter	Instagram
LinkedIn	Advert	Other

If you selected 'Other' above, please provide details below:

## Section 9 - Diversity

The below questions below are **optional** and will help us understand who is accessing TASC's support and how we can develop our services to reach more of the ambulance community.

What is your ethnic group?

White British	White Irish
White Other	Indian
Pakistani	Bangladeshi
Chinese	Other Asian background
African	Caribbean
Other Black/African/Caribbean background	Arab
White and Black Caribbean	White and Black African
White and Asian	Other Mixed/Multiple ethnic background

What is your religion?

Atheist	Buddhist	Christian
Hindu	Jewish	Muslim
No religion	Sikh	Other

Do you have a disability?

Yes

No

## Declaration

**The person in need of support must sign this form.**

- I agree that the details provided in this application form and supporting information may be held in the manual and computer files of TASC.
- I agree that TASC may discuss my case with my GP, Social Worker or any other charity or body who may be helpful with my application.

We will not contact or share your information, including your employer without your permission. I agree that the persons contacted may disclose information to TASC. The information you have provided in this application form will be stored and processed in line with General Data Protection Regulations (GDPR) 2016/17.

Signature	
Date	

## Thank you filling in TASC's application form

**If you are filling in your application form on a computer, please remember to save your completed form before continuing.**

Please return your completed application form and supporting information to [applications@theasc.org.uk](mailto:applications@theasc.org.uk), alternatively send your printed application form to:

TASC Wellbeing Support Team  
TASC, The Ambulance Staff Charity  
12 Ensign Business Centre, Westwood Way  
Coventry, CV4 8JA

If you have any queries or require assistance to complete the form, please call the Wellbeing Support Team on 0800 1032 999 or email [support@theasc.org.uk](mailto:support@theasc.org.uk).

### What happens next?

Once we have received your completed form and supporting information, a member of our team will be in touch to discuss your application and support needs. If you have any questions in the meantime, please email [support@theasc.org.uk](mailto:support@theasc.org.uk)

While you wait to hear back from us, which not check out our free Rightsteps portal which has lots of useful information and tips on a range of wellbeing topics, from anxiety and burnout to sleep difficulties and substance abuse. Visit our Rightsteps portal at [www.theasc.org.uk/Rightsteps](http://www.theasc.org.uk/Rightsteps)