**Application for Rest & Relax Grant**

**Cystic Fibrosis Trust provides grants towards short breaks, experiences and trips for children and adults who have cystic fibrosis. Our support is focused on people on low incomes who wouldn’t otherwise be able to afford a break, and those who face the most challenges because of their CF.**

**Who can apply?**

* Rest & Relax grants are available to people with a diagnosis of CF, who are under the care of a UK CF team
* Rest & Relax grants are only available to people who are on a low income and would be **unable to afford a break** – if you can afford a break yourself, we ask you not to apply.
* Rest & Relax grants are only available to adults and children with CF **who have been through, or are going through, a difficult time with their CF**. This could be related to their physical or mental health. We’ll ask you for information on this form to help us understand why it’s important for you/your child to have a break.

**What can you apply for?**

* We aim to fund short breaks and trips **in full.**
* We only fund trips, breaks and experiences **in the UK.**
* We can’t accept applications for trips that have **already been booked or paid for**.

**How to apply**

* Please read the information about our grants on our website before filling in this form. Our helpline team can also talk this through with you.
* Please fill in Sections 1, 2, 3 and 4.
* Please ask a member of your CF Team to complete the supporting statement in Section 5 or to email their statement directly to [helpline@cysticfibrosis.org.uk](mailto:helpline@cysticfibrosis.org.uk). Your CF Team can also fill out Sections 1, 2, 3 and 4 for you.
* Once you have completed all sections of the form, you or your CF Team should email it to [helpline@cysticfibrosis.org.uk](mailto:helpline@cysticfibrosis.org.uk)
* Our grant panel will make a decision on your application. The panel meets every 2 months. We will let you know when the panel will look at your application.

We do not accept applications by post. Our Helpline team can help you with filling out the form over the phone. Please call 0300 373 1000 (Mon-Fri 10am-4pm), Whatsapp message us on 07361 582053 or email helpline@cysticfibrosis.org.uk if you have any questions or need any help to complete this form.

We will contact you (and the person from your CF team who fills in section 5 of this form) to ask for more information, for feedback and to offer other support.

*In completing this form as an applicant or endorser, you consent that the Cystic Fibrosis Trust will store and process the personal information provided solely for the purposes of assessing and processing this grant application and future grant applications made by/for the applicant. We will treat any information provided in your application in strict confidence, and will not share it with anyone without your specific consent. For more information, please see our privacy policy on our website.*

**Section 1: Applicant’s details**

We may need to contact you about your application, so please make sure this information is correct. If the applicant is over 18 they must apply themselves or be aware the application is being made for them (sorry – no surprise trips possible!).

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| **Applicant’s name** (The applicant is the adult or child with cystic fibrosis) |  |
| **Applicant’s address** |  |
| **Applicant’s date of birth** |  |
| **Contact name** (parent/carer if applying for a grant for someone with CF who is under 18) |  |
| **Contact email address** |  |
| **Contact phone number** |  |

**Section 2 - Eligibility**

Please confirm that **all** of these criteria are met by putting ‘yes’ or a tick in each box:

The applicant has a diagnosis of cystic fibrosis and

The applicant lives in the UK and is under the care of a UK specialist cystic fibrosis team / centre and

The applicant’s household has less than £6,000 in savings or another bank account.

Please confirm that **at least one** of the following criteria are met:

The applicant (or their household if a child):

receives a means-tested benefit. Means-tested benefits include: Income Support; Pension

Credit; Housing Benefit; Council Tax support; Income-related Employment and Support

Allowance; Income-related Job Seeker's Allowance; and Universal Credit.

**OR**

cannot afford a holiday/break for another reason, please give details:

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**Personal circumstances**We may use this information when we make a decision on your application.You can use the tick boxes provided, or circle, highlight or write on the form.

**Does anyone else in your household have a long term health condition or disability?**

Yes 🗆 No 🗆

If yes, please give details:

**Number of adults in the household (18 and over)** ……..

**Number of children in the household (Under 18)** ……..

**Housing type (please tick one that best describes the applicant’s housing situation at the moment):**

Own home outright 🗆 Own home with mortgage🗆 Shared ownership 🗆 Private tenant 🗆   
Council Housing🗆 Housing Association🗆 Housed through job/business🗆 Caravan/mobile home🗆  
Living with parents/relatives🗆 Homeless (including B & B tenant or hostel, or staying with friends) 🗆

Other, please give details:

**Section 3: Tell us what you are applying for and why**

In this section, you can tell us about the short break, experience or trip you would like, why it’s important, and how it will benefit you/your child with CF. The information you provide will be looked at by a panel who will make a decision on your application, so please give us as much detail as you can.

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| **Please describe the short break/experience/trip this grant will fund** *- please provide as much information as possible about the trip or break you are planning. Please note we cannot fund breaks/trips that have already been booked or paid for, and we don’t usually part-fund trips.* |
|  |
| **I am applying for this grant because…** *please tell us about the challenges you/the applicant face because of cystic fibrosis. This helps our panel understand why a short break or trip is important. Our Rest & Relax grants are for adults and children who are going through or have recently been through a difficult time because of CF.* |
|  |
| **The difference this grant would make is…***please tell us how a short break, experience or trip would make a difference to you/your child with CF. We receive lots of applications and we can’t provide a grant to everyone who applies so please provide as much information as possible to help us understand the difference this grant would make* |
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| **Please tell us if there is anything else you’d like us to know.** |
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| **How many times has the applicant had to stay in hospital overnight because of cystic fibrosis in the last 12 months? Please provide the number of admissions to hospital (not the number of days)** |
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| **What date will the holiday/short break/trip take place (if known)?** Please note this must be after the date of the next panel meeting – check our website for panel dates |  |
| **When did the applicant last go on holiday?** |  |

**You can apply for a maximum of £450.** We aim to fund short breaks/trips/experiences in full, and we can only fund these in the UK.

* Please provide links or screenshots to show where you plan to go and approximate costs
* Don’t forget to include the cost of travel (public transport or car fuel) to get there if you would struggle to afford this
* Please contact us before you apply if the break will cost more than £450 and the grant would be a contribution to the total cost, as we are not usually able to part-fund.
* Please see our website for more details of what we can/can’t fund.

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| **Short break/trip/experience/day(s) out** | **Cost (£)** |
|  |  |
| **Total amount requested (maximum £450)** |  |

**Section 4 – payment details**We pay all grants by BACS bank transfer as this is the quickest way to get the funds to you. Please provide the bank details of your chosen account below. If you do not have a bank account please contact our helpline.

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| **Your name (as it appears on your bank statement)** |  | | | | | | | | | | | |
| **Bank/Building Society** |  | | | | | | | | | | | |
| **Account number** |  |  | |  | |  |  |  | |  | |  |
| **Sort code** |  | |  | |  | |  | |  | |  | |

We might share the story of your grant to help us promote our grant and raise awareness of how our support helps people living with cystic fibrosis. Stories like yours are really important to us as they show people how we can help. To protect your privacy, we always change names and any identifying details when we share these stories. If you prefer that we do **NOT** share your story in this way, please tick here or write this anywhere on the form:

Please tick here or write on this form if you would be interesting in sharing your story with the press/media (for press/media case studies, we will contact you before using your story)

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We may contact you in the future to find out how the grant has helped,  
and we would love it if you tag us in your holiday pics on social media or  
Whatsapp/email some photos to us – or send us an old fashioned postcard!  
**We love hearing about the trips and breaks our grants have funded.**

**Disclaimer**

**In applying for a holiday grant, you confirm you have read and agree to the following:**

*The Cystic Fibrosis Trust accepts no liability for death, illness, injury or decline in health caused as a result of or during this short break, trip or experience. Breaks are taken entirely at the applicant’s own risk and advice should be sought from the applicant’s specialist cystic fibrosis team or medical advisers prior to travelling.*

**Signed: ……………………………………………………………………………..***(if you are filling in this form electronically, please put your name here; we will take your completed application as confirmation that you agree to the above disclaimer)*

**Date: ………………………………………**

Applicant checklist

Have you:

* filled in all sections of the form?
* told us why this grant is needed and how it will help?
* included a link/screenshot to the break, trip or day(s) out you would like to buy with this grant?
* included the approximate cost of the break you would like to buy with this grant, including the cost of travel to get there if you need funding for this?

Next steps

* Please complete the monitoring form on the next page. We won’t use this information to assess your application, but it is important for us to understand who our support is reaching.
* Ask your CF team to fill in section 4 of this form
* You, or your CF team, will then need to email your completed form to [helpline@cysticfibrosis.org.uk](mailto:helpline@cysticfibrosis.org.uk)

Further information

* We cannot accept applications for breaks, trips or experiences that have already been booked or paid for.
* If the application is successful and you are booking a break that comes with free cancellation cover, we ask that you sign up to this when you book.
* If your application is successful, we ask that you book a break that is similar to, or the same as, the trip you told us about in your application. If you need to change your plans a lot, please discuss this with us before you book. Our grants can’t be used to fund travel outside of the UK.
* We will contact you (or parent/carer if a child) after you receive the grant to request a copy of a receipt or a booking confirmation. We might also ask for feedback or offer other support.
* If you do not provide a proof of purchase/booking confirmation you may not be able to apply for future grants from us.
* If your application is successful you will not be able to apply for another Rest & Relax grant for a short break or trip for 3 years. If you have already received a Rest & Relax grant from us in the past 3 years we will not be able to accept your application.
* We recommend taking out UK travel insurance including cover for cancellation. Our helpline team can provide a list of travel insurance companies that people with CF have told us have offered them reasonably priced cover. It is your choice whether you take out travel insurance; unfortunately we won’t be able to provide another grant if you have to cancel your planned trip for any reason.
* If your application is successful, we ask that you book your short break, trip or experience within 6 months of receiving the grant. Please let us know if you have to delay your plans for longer than 6 months for any reason.

Please help us to monitor the reach and impact of the Cystic Fibrosis Trust’s Welfare Grants programme by answering the questions in this final section. The information in this section is not used to make decisions and will not affect the outcome of your application.

**This information is about the person with cystic fibrosis who will benefit from the grant.**

**Gender** Man 🗆 Woman 🗆 Intersex 🗆 Non-binary 🗆 Prefer not to say 🗆 If you prefer to use your own term, please specify here …………………….

**Age** Under 18🗆18-24🗆 25-34 🗆 35-44 🗆 45-54🗆 55+ 🗆 Prefer not to say 🗆

**Ethnicity** Ethnic origin is not about nationality, place of birth or citizenship. It is about the group to which you perceive you belong. Please tick the appropriate box

***White***

English 🗆 Welsh 🗆 Scottish 🗆 Northern Irish 🗆 Irish 🗆  
British 🗆 Gypsy or Irish Traveller 🗆 Prefer not to say 🗆

Any other white background, please write in:

***Mixed/multiple ethnic groups***

White and Black Caribbean 🗆 White and Black African 🗆 White and Asian 🗆   
Prefer not to say 🗆 Any other mixed background, please write in:

***Asian/Asian British***

Indian 🗆 Pakistani 🗆 Bangladeshi 🗆 Chinese 🗆 Prefer not to say 🗆

Any other Asian background, please write in:

***Black/ African/ Caribbean/ Black British***

African 🗆 Caribbean 🗆 Prefer not to say 🗆

Any other Black/African/Caribbean background, please write in:

***Other ethnic group***

Arab 🗆 Prefer not to say 🗆 Any other ethnic group, please write in:

**Sexual orientation** Heterosexual 🗆 Gay woman/lesbian 🗆 Gay man 🗆 Bisexual 🗆Prefer not to say 🗆 Child/Not applicable🗆 If you prefer to use your own term, please write in:

**How did you hear about the Cystic Fibrosis Trust’s grants?** Cystic Fibrosis Trust website 🗆   
Social media 🗆 Hospital/cystic fibrosis team 🗆 Other, please write in:

**Do you have more than £6000 in savings?** Yes 🗆 No 🗆 Prefer not to say 🗆

**What is your household income, per year (including benefits and earnings)?**less than £6,000 🗆 £6,000-£14,999 🗆 £15,000-£29,999 🗆 £30,000-£44,999 🗆   
£45,000-£59,999 🗆 More than £60,000 🗆 Prefer not to say 🗆

**Section 5 – Supporting statement from the endorser**

**The endorser is a member of your CF Team such as a clinician or CF social worker.**

This section should completed by the endorser. Please note that we may contact the endorser to request further information related to this application or to confirm they provided the statement.

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| **I confirm that this grant will be used to benefit a person living with cystic fibrosis, the information given is correct to the best of my knowledge, I have reviewed the applicant’s travel plans and I support this application.** | |
| **Name** |  |
| **Job title** |  |
| **Place of work** |  |
| **Contact number/email** |  |
| **Please tell us about why you think this grant is needed and how the person with CF will benefit from a short break/trip. *Please provide specific information to explain the need, with reference to the applicant’s CF health and the difference a break could make to their overall health and wellbeing.*** | |
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**Once you have completed all sections of the form, you or your CF Team should email it to** [**helpline@cysticfibrosis.org.uk**](mailto:helpline@cysticfibrosis.org.uk)

Supporting statements can also be emailed separately to us at helpline@cysticfibrosis.org.uk. They must be emailed from the endorser’s professional email account.

**We will contact applicants and endorsers to gather more information, for feedback and to offer other support.**