**GF Emergency Support Fund Application Form**

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| **Name of Academy:** |  |
| **Application submitted by:** |  |
| **Date of Application:** |  |
| **Please provide a contact number in case of admin query:** |  |

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| **Name of Family/individuals** (Initials if needed to be confidential) |  |
| **Brief description of context and nature of emergency**  |  |

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| **Exact Details of request**I.e.: specific items required  |  |
| **Exact Cost:** |  |

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| **Please provide specific details of how this can be ordered/paid for by our administrator including as much detail as possible** \*Do not place orders before approvalI.e.: Invoice, Weblink, bank transfer for company, reference of repayment etcAttach any other necessary documents |  |
| **Any other notes on actioning this request:**I.e.: Delivery address if applicable – put school for delivery if you intend to give direct to family |  |

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| **Signed by Ethos Team Member:** |  |
| **Signed by D Boden/G Spicer:**  |  |
| **For Office Use Only:** | **Application Ref No:**  |