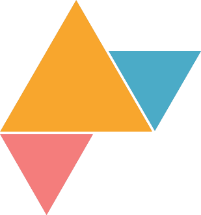
**FAMILY SUPPORT AND COMPLEX FAMILIES**

**FAMILY MATERIAL SUPPORT APPLICATION FORM**

Use this form to apply for funds to purchase items, equipment or other material assistance for families. Red the Material Support Fund Policy and Procedure first.

|  |  |  |  |
| --- | --- | --- | --- |
| Workers Name |  | Date of application |  |
| Name of Workers Team |  | Name of Workers manager |  |
| Family contact name |  | Family contact number |  |
| Delivery address for the item |  | Mosaic Child ID No |  |
| Any special instructions for delivery |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| MATERIAL ASSISTANCE REQUIRED | | | | |
| Please briefly describe the material assistance you are applying for and why: | | | | |
| ORDER DETAILS | | | | |
| **Supplier Name** | Product Include: Description, Product code & Size | **Web Address for the item** | Cost (incl.  delivery & excl. VAT) | VAT (if applicable) |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

By signing this form, you are confirming that:

* The family is currently open to a Family Support and Complex Families service or on an open early help referral decision (EHRD) at Children and Families Contact Service
* The early help assessment and plan, or EHRD, show how the provision of material assistance will help progress the family’s goals, improve the child/ren’s welfare and/or meet the child/ren’s identified needs
* The family’s income has been verified as far as possible, they are receiving or have applied for all benefits or tax credits they are entitled to, and you have supported them, where necessary, to have a welfare rights check to maximise their income
* The Council’s Welfare Assistance Fund cannot provide the material assistance you are asking for (see Guidebook <https://ascpractice.camden.gov.uk/early-help-guide/family-early-help-covid-guidebook/finance-bills-and-financial-hardship/welfare-assistance-fund/#main> )
* All other avenues for provision of material assistance, including charitable or grant-giving organisations, have been explored and exhausted. (see Guidebook here <https://ascpractice.camden.gov.uk/early-help-guide/family-early-help-covid-guidebook/finance-bills-and-financial-hardship/grants-from-charities-trusts-and-foundations/#main> )

|  |  |  |  |
| --- | --- | --- | --- |
| Authorisation Signature | | | |
| **Date form received** |  | **Approved/Rejected and date** |  |
| **Signature** |  | **Comments** |  |

**Authorisation Levels**

|  |  |  |
| --- | --- | --- |
| Amount per payment | Annual ceiling per family | Who Should Sign This Form |
| Up to £100 | Up to £250 | Team manager |
| Between £101 and £500 | Up to £500 | Service Manager |
| Over £500 | Over £500 | Head of Service |

**Please send your completed form to:**

* Your team manager if the amount requested is up to £100
* Your service manager if the amount requested is between £101 and £500
* Your service manager if the amount requested is over £500 (who will review it before sending to the Head of Service for authorisation)
* Once approved, send the form to the Information Support Officer if you need assistance purchasing an item on the service purchase card

In all cases, please casenote the request for material assistance, and upload a copy of this form as an attachment to the child’s Mosaic file.

**TEAM MANAGERS WHO AUTHORISE FORMS:**

Please send a signed copy or scan to your service manager for their central records.