**Criminal Bar Association Hardship Fund**

**Application Form**

**Please note that all information supplied will be treated in the strictest confidence.**

**Decisions on your application will be communicated by the dedicated Hardship Fund e-mail.**

**We aim to process your application within 3 working days.**

**In relation to any supporting documentation that you send to be considered alongside this application form, such as aged debt reports, we would ask that you redact any information which might identify you. For example, by removing your name and address or other identifying information from bank statements.**

**Once you have redacted that information please ensure you provide that document with an appropriate title so we can identify its purpose.**

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| **Section 1 - Personal details** | |
| Name |  |
| E-mail address |  |
| Chambers & address |  |
| Chambers telephone number |  |
| Home address (please leave blank if you would prefer the CBA to use your professional address) |  |
| Home telephone number |  |
| Mobile telephone number |  |

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| **Section 2 - Professional details** | |
| Inn of Court |  |
| Date of Call |  |
| Is it your present intention to continue practising at the criminal Bar for the foreseeable future? |  |
| **Have you previously applied for an Award from this fund? If yes; what was the date and outcome of your application?** |  |

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| **Section 3 – Financial Circumstances** | |
| **Income** | |
| What was your gross income in the last year? |  |
| Do you receive any other income, including anticipated earnings from other business interests? |  |
| Do you receive financial help from your parents? |  |
| Have you received any scholarships or awards in the last 12 months, if so what? Please stipulate the figure awarded. |  |
| What is your expected recoverable aged debt? |  |
| Are you up-to-date in making returns and payments of tax and VAT? |  |
| If no, please provide details of returns and payments that are outstanding. If you have an agreement in writing with HMRC please provide a copy for the panel’s reference. |  |
| What is the approximate value of assets that you own or are beneficially entitled to? |  |
| What is the approximate amount of your liabilities? |  |
| Have you applied for any other financial assistance other than ordinary loans from financial institutions? |  |
| If yes, what was the outcome of the application and when did you make it? |  |
| Do you receive dividends? If so please stipulate? |  |

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| **Outgoings** | |
| Mortgage |  |
| Rent |  |
| Other (please stipulate) |  |

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| **Assets and debts** | |
| Current savings |  |
| Other capital |  |
| Student loans |  |
| Bank overdraft |  |
| Credit cards |  |
| Other debt |  |

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| **Additional information** | |
| Is there any other information that you believe is relevant to a consideration of your financial position and application (for example, other incomes into your household?)  If yes, please specify details of income. |  |
| How many dependents are you supporting and to what extent?  If you are supporting children please specify maintenance payments or school fees. |  |
| Do you have any other significant outgoings or liabilities. |  |

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| **Section 4 - Request for assistance** |
| The Hardship Fund is designed to assist those who are suffering a genuine, serious and unexpected financial hardship from a loss of work due to their participation in the days of action.  Please provide particulars of the hardship you are suffering and the amount of financial assistance that you require.  Please use additional space if necessary. Where appropriate we would be grateful if you could please provide documentary evidence to support any answers given below.  In *general*, panel’s would appreciate sight of the following to properly assess the merit of your application.   1. Your diary covering the previous 12 months and any comments you can provide as to the adverse impact on work noted therein as a result of participating in the action; 2. A payment summary print covering the previous 12 months; and 3. Current aged debt print. |
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**Declaration**

I declare that:

1. The information contained in this Application Form is true to the best of my knowledge, information and belief;
2. I am a member of the criminal bar who currently practices predominantly in criminal law and is authorised by the Bar Council to practice as a barrister;
3. I am making this application on my own behalf; and
4. I have read the Hardship Fund rules and agree to abide by the same.

I understand the details on this phone will only be used for the purposes of considering the application and will not be passed on to any third-party (save as required by law) except with the consent of the Applicant.

I agree to the CBA holding a copy of this application form for such period as advised by the counsel instructed on their behalf and/or accountants and/or as required by law.

**Signed:**

**Name:**

**Date:**