



In what way do you or your family have particular difficulties, or in what way are you in crisis?

Purpose of Grant (what do you want to do or buy?)

How will this help you?

## Funding

How much will it cost in total?  
If more than one item, please list the budget here

Total cost £

How much do you need from us? £

Where will you get the rest of the money if you are not asking us for the full amount?

Have you already asked anyone else to fund this? If yes, who and what did they say?

Have you approached Social Services for assistance? If so, what was the response?

Applicant's Signature:

Date:

**DO NOT SPEND ANY MONEY UNTIL YOUR AWARD HAS BEEN CONFIRMED IN WRITING.**

## Reference: Wright Funk Fund



Please give this form to your referee and ask them to complete and return to us separately. The referee should be a professional person e.g. social worker, GP, teacher. You cannot have a family member or close friend as your referee.

Name of applicant:		
Name of Referee:		
Position:	<input type="checkbox"/> GP <input type="checkbox"/> Social Worker <input type="checkbox"/> Community Nurse <input type="checkbox"/> Other (please state).....	
Address:		
	Post Code:	
Telephone number(s):		
How do you know this person?		
How long have you known this person?		
Please describe the applicant's/applicants' family situation. In what way does this family have particular difficulties, or in what way are they in crisis ?		
Why can't Social Services pay for the request?		
Referee's Signature:	Date:	

Thank you for your assistance. The Wright Funk Fund is managed by County Durham Foundation. Return completed forms to:

Brenda Dye, Grants Officer, County Durham Foundation,  
 Jordan House, Forster Business Centre, Finchale Road, Durham, DH1 5HL  
 Tel: 0191 383 0055 Fax: 0191 383 2969  
 Email: [brenda@countydurhamfoundation.co.uk](mailto:brenda@countydurhamfoundation.co.uk)