

THE GILMOUR TRUST

Application for Grant

Name (Mr/Mrs/Miss)

Address including postcode

.....

Telephone Number

Occupation (before retirement)

Place and Date of Birth

How long resident in Irvine

State of Health

Single, Married, Widow or Widower

Name, Occupation & relationship to you
(if any) of other persons living with you

Annual Income from Earnings	Yours	Spouse
State Pension	£	
Private Pension	£	
State Allowance	£	
Any other	£	

Annual Income from all other sources
(Interest on Investments etc)
Please detail only if over £200 per annum

Other particulars considered useful by
Applicant

Applicant's signature

Date

I certify that I am well acquainted with the above applicant, and that (s)he is a person of deserving character in reduced circumstances, and that, so far as known to me, the foregoing particulars are strictly accurate.

This Certificate must be signed by a responsible person intimately acquainted with the applicant.

..... signature Full name and
..... address of Responsible Person