



Zain Legal & Co Financial Hardship Application

NOTICE OF CONFIDENTIALITY

This form includes highly confidential personal data and intended only for restricted and internal use. Unauthorised use, copying, distribution, or dimension is strictly prohibited.

INSTRUCTIONS

Please provide accurate and detailed information in this form so we can evaluate requests in a timely manner.

| PERSONAL INFORMATION | |
|----------------------|--|
| Name: | |
| Address: | |
| Gender: | |
| Age: | |
| Education: | |
| Marital Status: | |

| FAMILY/LIVING SITUATION | |
|---|--|
| The total number of family members: | |
| The number of dependents: | |
| Place of residence e.g. rental, owned: | |
| Employment Status: | |
| Employment Status of Spouse If married: | |

| | |
|---|--|
| Means of transportation: | |
| Health insurance: | |
| Cars owned: | |
| Area of living: | |
| WORKING SITUATION | |
| Source of income: | |
| Total income: | |
| Total expenditure: | |
| The total value of savings: | |
| Debts you owe: | |
| The total worth of the assets owned: | |
| Reference to support your application (References can be from someone credible in the community like your GP, Support Worker, Councillor) | |

Statement of circumstances (state the reason you are in need):

AID HISTORY

List any Aid if received within last calendar year:

TERMS AND CONDITIONS

We will have a face to face meeting at the house of the applicant before granting him/her financial aid. We will require to check the following documents to assess if the person is eligible for our funding:

- ID passport/Driving license.
- Salary slips/ Benefit statement letter from DWP to confirm your benefit payments.
- Bank statement/Utility bills to confirm the living address.

DISCLOSURE

I/We confirm that we are in true financial hardship. I/we have exhausted all options for financial aid and make a declaration that my/our financial position has been adequately portrayed within this application.

I/we understand that we are eligible for any kind of funds for poor/helpless people and we meet the criteria to receive financial aid.

Signed: _____

Date of submission: _____

Mailing Address:

Send the completed application form to the following address,

Managing Director

Zain Ghulam

8 Mount Road,

Handsworth,

Birmingham,

B21 0NL.

Or Email at

info@zainlegal.co.uk