



Application Form

Please answer the questions as fully as you can. The decision-making panel will use this to reach their decision on your application. If you do not complete some boxes it may mean that the panel is unable to agree an award.

Carers can apply for up to £300 from the Creative Breaks Fund.

Guidance is available on our website: www.fva.org/carers

For help call 0800 389 6046 or email timeforme@fva.org

We care about protecting your personal information. We will only use it for considering your application and your participation in the fund. For more information about your rights and what we do with your data, including who we share it with, you should read the **Time for Me Privacy Statement** at **www.fva.org/carers**

Section 1: Your details (the young carer)				
Please provide the following information	n			
Title: (delete as appropriate)	Mr / Ms / Miss			
Your full name:				
Address:				
Postcode:				
Telephone number:				
E-mail address (if any):				
Date of birth:				
Ethnicity: (e.g. Scottish, British, Asian)				
Name of your School:				
Do you have a Young Carers Statement	?	Yes □	No □	
Have you received Time for Me funding	in the last two years?	Yes □	No □	
Have you received Creative Breaks funding in the last two years?		Yes □	No □	
Section 2: Payment Details Please provide the nominated Bank Account details and account holder name (as written on your bank card) so that we can make the award if you are successful. *** NB We will not process a payment if the information does not exactly match that of your bank ***				
Name on account				
Account Number				
Sort Code				



Section 3 - Information about the caring situation Notes: All applicants must be a young carer who lives in Fife. Please refer to the guidance and scheme rules for more information. This section is designed to give the panel an understanding of your caring role and how it affects you as a young carer.					
What is your relationship to the person you care for:					
What is the date of birth of the person you care for:/(DD/MM/YYYY)			(DD/MM/YYYY)		
Why does this person need your help to care for them?					
How does the care you provide affect you?					
How long have you been providing care?					
On average, how many hours a week do you spend caring or providing support?					
Section 4: Your caring role Notes: The questions in this section are designed to give the panel members information on any support you (the carer) currently receive. Please answer as fully as possible – see Guidance Notes for more info					
What support with day-to-day tasks do you get at the moment?					
What formal breaks do you get from your caring situation? Who helps you to get a break, and how often?					
(e.g. private or home care agencies; charities like Crossroads; other respite services)					
What informal breaks/support do you access, and how often?					
(e.g. help from neighbours or family)					
Section 5 - Reason for break Why do you need a break? Mention any issues which have put pressure on you as a young carer, or any issues which are causing concern about the caring situation. The panel will consider how your caring role impacts on the following when assessing your application. Please provide examples of your caring role impacts on any of the above.					
Your mental health and wellbeing (stress, anxiety etc.)					

Your caring role impacts on your free time for social and/or leisure activities	e			
Your relationship with the person you care for, and others				
Your schoolwork/homework and general education				
Section 6 - About the short break for the carer In this section we are asking you to tell us how you will use the Time for Me fund to take a short break from your caring role. Please provide as much information as you can about the short break you want and how you would like to use the funding you have applied for. Time for Me is not just for holidays or trips away from home. The fund aims to support young carers to access breaks from their caring role in whatever way is best for the young carer. The Guidance Notes will				
help you understand what the fund		· · · · · · · · · · · · · · · · · · ·		
The main priority is that you can access a break which is most beneficial to you. If you are not clear what break would be best for you, please contact Fife Young Carers on 01592 786717 before going any further.				
We cannot process applications which do not show a clear plan for the break.				
Describe what you would like to do, when, and who will take part. Will your break be with the person you care for, will you take part in solo activities or will you be accompanied by someone else?				
Is the short break a one off or will yo	ou be able to	benefit from more than once?		
What is the estimated cost of the break?		f		
virial is the estimated cost of the break?		L		
How much funding are you looking for?		£		
If you are not applying for the full cost of the break, how will you make up the shortfall?				
Have you included a quotation showing the costs?			Yes □ No □	
If you do not receive the full sum you	are asking fo	or will you still be able to take the br	eak	Yes 🗆 No 🗆
Have you had a holiday in the past 12 months?				Yes □ No □

Section 7 - Break Outcomes Note: These questions are about the difference the break will make. We have listed the main areas we would like to focus on, but please tell us about any other benefits you think a break might bring. Your break does not have to meet all the outcomes; choose the outcome or outcomes which are most relevant to you.			
What difference will the break make to your mental health and wellbeing (stress, anxiety etc.)?			
What difference will the break make to your caring role impacts on your free time for social and/or leisure activities?			
What difference will the break make to your relationship with the person you care for, and others?			
What difference will the break make to your schoolwork/homework and general education?			
Please describe any other benefits you expect to gain from the break:			
Section 8 - Ensuring the break is a We understand that your circumstances you to be realistic and plan to give the b	can chan	ge quickly. These questions are des	signed to encourage
Have you discussed the proposed break with the person		person you care for?	Yes □ No □
If not, please explain why:			
Does the person you care for also support your ap		oplication?	Yes □ No □
What do you , need to do to make sure your short break is successful for you?			
Are there any reasons you can think of that might get in the way of your break being positive for you? What steps can you take to overcome them?			
Can you repeat your activity with the Time for Me funding to make sure you enjoy more than one break from caring?			Yes □ No □



Section 9 - Signatures I confirm that all information provided on this form is accurate and true.					
I understand that the panel may seek additional information in support of this application. I am aware that I can only receive one funding award in a twelve-month period. I agree to complete the brief evaluation exercise (either a form or a telephone call) if I am successful, and to submit proof of purchase/receipts about my break.					
Your signature (the young carer)			Date:		
Supporter's signature			Date:		
Supporter's name, servic	e and role:				
Supporter's contact phone number					
Supporter's e-mail					
Section 9 – Application process					
Where did you find out about Time for Me Funding?					

Completed application forms should be sent to:

By Post: Creative Breaks, Fife Voluntary Action, Caledonia House, Pentland Park, Saltire Centre,

Glenrothes, KY6 2AL.

By Email: timeforme@fva.org

Applications can be submitted at any time. The panel is scheduled to meet twice a year and decisions will not usually be made between meetings. All applications are considered alongside the scheme rules and are subject to funds be available.