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|  | **Specialist Children’s Services**  First line of the address  Second line of the address  TOWN  Postcode    Phone: Insert (code) number, ext  Ask for: Name  Email:  xxxxxxxxxx    Date  References (or delete) |

**Guarantor Application form – (name):**

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| This form allows you to seek an appropriate corporate guarantor. It will allow Surrey County Council to gain an understanding of your current circumstances including your financial positon and your overall ability to manage living in your own accommodation and managing a tenancy.  The answers that you provide to Surrey County Council within this application form are part of the first stage application process of SCC 18+ Care Leavers Service potentially acting as your guarantor.  Once you have completed this application form in **full,** please submit the form to your worker (name).  Surrey County Council will endeavour to provide you with a response within 2 weeks of your application being received. When you receive a response from us, you will be provided with information on whether we have accepted your application, declined your application or require further information to come to a decision.  If your application is successful, we will attempt to issue you with your guarantor form within 1 week of acceptance.  Should you have any questions or require assistance when completing this application form, please contact your above worker who will be able to assist. |

From everyone at Surrey County Council, we wish you the best of luck with your application.

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| What is the accommodation for? (e.g. University) |
| If University accommodation – Name of University: |
| What is your current education, training or employment status? Employed full or part time, a ful time student (College or University)  .  Do you have any reason to believe that this may change over the next 6 months? |
| How much can you afford to pay in rent per month?  £ |
| Please explain how you will pay your rent, for example, wages, Housing Benefit, Student Loan, support from Children’s services, etc.: |
| Please submit to Surrey County Council copies of any below documentation **with** your application form. Please tick which documents you have also attached.  Housing Benefit eligibility letter  Letter of financial support from Surrey County Council  University Finance entitlement summary  Please also attach copies of the last 3 to 6 months’ bank statements. Alternatively, if you work, please attach the last 3 to 6 months’ payslips and proof of employment.  3 to 6 month’s bank statements  3 to 6 month’s payslips and proof of employment |
| Please provide us with a breakdown of your planned expenditure in order to provide evidence to Surrey County Council you have a monthly budget.  Please tick the appropriate box if you receive your income other than monthly:  Daily  Weekly  Fortnightly  Other, *please specify\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_* |
| Planned expenditure breakdown:   |  |  | | --- | --- | | Monthly income | | | Salary | £ | | Income support | £ | | Housing Benefit | £ | | Surrey Council support | £ | | JSA | £ | | Student Finance England (for university students only) | £ | | Bursary from University (for university students only) | £ | | Other, *please specify* | £ | | Other, *please specify* | £ | | **Total amount** | **£** |  |  |  | | --- | --- | | **Monthly outgoings – Section A**  (if you are a university student and your outgoings are one payment covering a selection of the list below, please complete section B) | | | Rent | £ | | Gas | £ | | Electric | £ | | Council Tax | £ | | Water | £ | | TV Licence | £ | | Food | £ | | Alcohol | £ | | Tobacco | £ | | Going ‘out’ | £ | | Clothes, Make-up, toiletries and other | £ | | Hobbies | £ | | Cleaning products | £ | | Travel | £ | | Phone | £ | | Internet | £ | | Education | £ | | Other, *please specify* | £ | | Other, *please specify* | £ | | **Total** | **£** | |  |  | |
| **Section B – only complete if you are a university student**   |  |  | | --- | --- | | University accommodation costs per month (please list what this includes e.g gas, electric, water) | £ | |
| Have you found a property?  Yes No |
| If you have said no, do you know which area/s you may want to live in, if so, *please specify:* |
| Please specify what research have you carried out in relation to local rent costs? *I.e. is this accommodaiton similar in cost to others? If not, why have you chosen this accommodaiton?* |
| In how do you plan to live:  Alone  In a shared house with friends  In a shared house with others  In student halls of residence for university study  Other, *please specify\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_* |
| Which skills do you believe that an individual requires in order to live independently and how would you describe those you have? How did you learn them? How do you use them? |
| If you had found yourself in financial difficulty, who would you turn to for budgeting and practical support? *Please explain.* |
| How would you financially cope if you had found yourself with an unexpected bill, loss of your job, or if you do not have any ‘spare money’; whilst still paying your rent? |
| Please provide us with contact details for a supporting reference, for example, your Personal Advisor, Social worker, Carer, Employer, Tutor and other:   |  |  |  |  | | --- | --- | --- | --- | | Name and Job title | Contact telephone | Contact email address | Company name | |  |  |  |  | |  |  |  |  | |
| Please specify any further information that you feel may help towards your application. |

**Applicant signature:**

**Date:**

**Checked by (PA/TM):**

**Approved by: Assistant Director Looked After Children & Care Leavers.**

**Date:**