

Document Title	Hardship Assistance
Version	2a
Document Code	FRM- HardshipAssistance -V2a



Unit 30/31
24 Cavenagh Street
Darwin, NT 0801
info@umnt.org.au
umnt.org.au

Circumstantial Hardship Assistance Application Form

Part 1: Applicant Details

Full Name		Sex	<input type="checkbox"/> M <input type="checkbox"/> F
Home Address		Post Code	
Mobile Number		Date of birth	
Email Address		Occupation	
Are you Aboriginal or Torres Strait Islander?	<input type="checkbox"/> Aboriginal <input type="checkbox"/> Torres Strait Islander <input type="checkbox"/> No		
How long have you lived in the NT for? (years, months)			
Are you a member of any Islamic organisations in the NT?	<input type="checkbox"/> No <input type="checkbox"/> Yes, specify _____		
Marital Status	<input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Divorced <input type="checkbox"/> Separated <input type="checkbox"/> Widow		

Part 2: Eligibility

1. What criteria is used to determine funding?

- International students
- Refugees
- Homeless
- Older people who are restricted and isolated due to finance.
- Individuals with no recourse to public funds
- Individuals suffering from any sickness, disability or terminal illness, and where there has been a loss of income.
- Individuals whose income is not enough to meet basic needs.
- Assistance and guidance for those who are in debt out of necessity, especially where they are incurring interest.
- Assistance with rent payments and rent deposits if in arrears.
- In exceptional circumstances for any urgent matters

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2. What cannot be funded?

- Applicants who have received a grant in the last 3 months from UMNT.
- International travel for any purpose
- Immigration costs
- Gifts (including birthdays and festivals)
- Holidays

3. How much money can you apply for?

This is dealt on a case-by-case basis and our form would need to be completed for further support to be provided.

4. What areas are you seeking support in? (You may tick more than one)

- | | |
|--|---|
| <input type="checkbox"/> Public transport support | <input type="checkbox"/> Disability support |
| <input type="checkbox"/> Essential food and clothing | <input type="checkbox"/> Emergency accommodation assistance |
| <input type="checkbox"/> Fuel vouchers | <input type="checkbox"/> Rental assistance |
| <input type="checkbox"/> Foodbank vouchers | <input type="checkbox"/> Utility bills (electricity) |
| <input type="checkbox"/> Counselling | <input type="checkbox"/> Other, please specify: _____ |

Part 3: Supporting Documentation

1. Photo Identification

Please attach one of the following photo IDs and tick the box

- Driver's License
- Passport
- Age card
- Valid tertiary education student ID

2. Other Supporting Documentation

For us to help you, we require a **3-month bank statement**. Other supporting documentations such as **electricity bill** will help your application as well.

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3. Please describe your circumstances and need

For more space, please attach extra pages and initial.

Part 4: Declaration

I confirm that the information given is true and complete to the best of my knowledge.

Signature

Date (DD/MM/YYYY)

Please return this form to: UMNT Inc. (address in header) or: info@umnt.org.au

Office Use Only

Director/Delegate Approval

This application for registration for Circumstantial Hardship Assistance has been reviewed and assessed as: Approved Not Approved Approved (on condition):

Signature and Full Name

Date (DD/MM/YYYY)