TRAVELLERS AID TRUST

The Violet Clegg Fund

Small Grant for Gypsies and Travellers to Overcome Hardship or Benefiting Communities

Referee Form

GUIDELINES:

1. *This form must be completed and signed by a professional (such as a health visitor, doctor, teacher, social worker, Traveller Liaison Officer, outreach worker, etc… but not a friend or relation) who knows the applicant. Where possible, please include an agency stamp and/or a cover letter on official headed paper.*
2. *Referees must have read and be able to verify the information given in the completed application form.*
3. *If successful, referees will be expected to provide feedback to the Trust on how the grant has benefited the applicant.*

Section One **Our Ref.:**_____

Referee's name: _____

Profession/Position : _____

Contact Address: _____

_____**Post Code:** _____

Contact telephone number/email address: _____

Section Two

(a) Applicant's name: _____

(b) In what capacity do you know the applicant? _____

(c) How long have you known the applicant? _____

(d) Have you read the completed application form? **Yes / No**

(e) Can you verify that the information provided is accurate? **Yes / No**

(f) Is there anything else you think we should know about? **Yes / No**
(if yes, please use the space below or continue on another sheet)

Signed: _____ **Dated:** _____