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| cid:C7141E48-6852-4C73-BD2E-3BB5EA9DE23D@Home | Suite 114, Pentagon Centre, 36 Washington St,Glasgow G3 8AZ Tel: 07512 825588 / 07515 886822Email:admin@glasgowchildrensholidayscheme.org.ukA Scottish Charitable Incorporated Organisation Registration No: SC022654 |

# CARAVAN HOLIDAY APPLICATION FORM

Please ensure that both parts 1 and 2 of the application form are fully completed:

* Part 1 – holiday application details (pages 1 and 2 of form) to be completed by applicant
* Part 2 – details to be completed by referrer (pages 3 and 4)
* Part 3 of the form provides general guidance and information about the application process

**Part 1 – Family Details (to be completed by lead family member)**

**NAME**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(This should be the lead family member and their contact details)

**Position in the family** (e.g. parent, carer) \_\_\_\_\_\_\_\_\_\_\_\_\_­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Age** \_\_\_\_\_\_\_\_\_ **Sex** (M/F) \_\_\_\_\_\_\_\_ **Ethnicity (please state – refer to details below \*) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**Postcode: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Contact Tel No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Email address** (if you have one): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Please note, we will contact you by email unless otherwise stated)

**Have you previously had a holiday through the Holiday Scheme**? Yes (If yes, what year\_\_\_\_\_\_) No **(please circle)**

Note: Families who have been successful in getting a holiday in the previous year will generally not be offered a holiday for the following year unless exceptional circumstances apply.

**Who else would you like to come on holiday with you? Please give names and relationships below.**

The names of all adults, names and ages of all children must be given. **Free entertainment passes** will be given to those named on the form for our caravans at Wemyss Bay.

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| **Name** | **Age** | **Primary (P) /****Secondary (S) School \*\*** | **Sex****(M/F)** | **Relationship to lead family member** | **Ethnicity (please state – refer to details below \*)** |
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**\*Ethnicity**: please advise if: ASIAN - Indian, Pakistani, Bangladeshi or other CHINESE MIXED - please provide detail

BLACK - African, Caribbean or other – please provide detail WHITE - Scottish, English, Welsh, Irish or other

\*\*Please indicate if child will be going to Secondary School after August.

**Please state below the reasons why you are applying for a holiday. We offer holidays to families who would not otherwise be able to afford one.**

**Our Caravans:** We have 5 caravans at Wemyss Bay Holiday Park, 1 of which sleeps up to 6 people, 4 sleep up to 8 people. We have 1 fully wheelchair adapted caravan at Wemyss Bay that has a wet room, portable helper frame, shower chair, dropped level work surfaces and light switches and a disabled ramp/balcony. Two other caravans at Wemyss Bay have disabled ramp access. Information about our caravans can be viewed at [www.glasgowchildrensholidayscheme.org.uk/ourcaravans](http://www.glasgowchildrensholidayscheme.org.uk/ourcaravans)

**Our Holidays and Breaks:** Holidays are offered between March and October each year. Most holidays are for one week Friday to Friday, however we also offer Friday to Monday and Monday to Friday breaks.

**If you have a specific preference, please indicate below**:

* Prefer week holiday (Friday to Friday) Yes / No / No preference
* Prefer shorter break (Friday-Monday or Monday to Friday) Yes / No / No preference

We cannot, however, guarantee that we would be able to meet your preference as we have many more applications than we can meet. Please note that school holiday dates are prioritised for families with secondary school children as they are generally unable to get time off school. **Families with primary aged children or younger will generally be offered dates during school term time only**. You will have a far higher chance of being offered a holiday if you can be flexible about dates.

**Fees**: A fee of £40 is charged for each week’s holiday to help cover weekly cleaning costs (£20 for Friday to Monday; £30 for Monday to Friday).

I would like a caravan holiday because \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**If you or anyone in your party has an addiction or social worker** please give their name and contact number below.

Name of addiction or social worker (if applicable): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact telephone number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**If you or anyone in your party take, or are prescribed, methadone or any other drugs** we must be told on this form.

Name of any prescribed or other used drugs: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please note that we have a strict NO DOGS OR CATS policy as some children are allergic to animal hair. There is a strict NO SMOKING policy in all our caravans.**

WE ARE A SMALL CHARITY AND CANNOT AFFORD BIG REPAIR BILLS. IT IS IMPORTANT THAT YOU AGREE TO LOOK AFTER THE CARAVANS AND ABIDE BY THE SITE RULES**.**

If allocated a holiday I promise to look after the caravan and keep the site rules.

**Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

It would be helpful to know how you would plan to travel to the holiday - please advise which one applies to you.

**I have access to a car** yes / no **I will travel by bus or train** yes / no

**Part 2 – Referrer and monitoring details (to be completed by referrer)**

Please give the name and address of someone who can support this application and ask them to complete the information requested and sign the form below. This person (referrer) could be a voluntary organisation worker, health visitor, children's teacher, social worker etc. but needs to be someone who is aware of your current family circumstances.

Referrer’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Organisation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Full Postal Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Postcode: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Contact Tel No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Note to Referrers on allocation process and health and safety issues**

The Holiday Scheme’s purpose is to benefit children and families who cannot afford a holiday. As priority is given to those families with the greatest need, it is important to tell us as much as possible about why you are supporting the family’s application and whether there are any health, safety or disability issues. For health and safety reasons please advise us of any strong medication prescribed together with details of how this will be safely stored in the caravan.

The caravans are relatively confined spaces compared to a house, with no area inaccessible to children. It is the management committee’s assessment that neither methadone nor any other strong medication should be in our caravans, due to the risk of children finding and taking them, unless appropriate guarantees can be provided as to safe storage arrangements. This would be required from the appropriate social worker or addictions worker with details of the medication being taken and safe storage plan. Alternatively, arrangements would have to be made for methadone scripts to be dispensed on a daily basis from a local Chemist near the caravan park.

Similarly, if there is any risk of domestic violence, child neglect and/or drug or alcohol abuse, please do not refer the family. There are many families that cannot afford a holiday who would benefit; like you, we do not want any child put at risk as a result of being offered a holiday through the Scheme.

**Please state below the reasons for supporting this application:**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Please confirm the following:**

*I can confirm that* ***no one included in the application*** *has**any current or suspected issues with drug or alcohol abuse and are not prescribed methadone or any other strong medication YES / NO (please delete as appropriate)*

If no, please advise of proposed safe storage or prescription collection arrangements that will be put in place for any holiday: *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

**Issues the family is affected by – please tick any that apply** (this is required for monitoring and funding purposes)

Financial Hardship: It is anticipated that **all** applicants will either be on benefits or low incomes and otherwise generally unable to afford a break/holiday, please confirm this in the tick box below.

|  |  |  |
| --- | --- | --- |
| **Financial Hardship (please tick box to confirm)** |  |  |
| Previous alcohol or drug/substance misuse |  | Parents/Carers of children with a physical disability |  |
| Bereavement  |  | Parents/Carers of children with a learning disability |  |
| Mental health issues |  | Parents/Carers of children with sensory impairment |  |
| Domestic Violence |  | Parents/Carers of children with multiple care needs |  |
| Autism/autism spectrum disorder |  | Parents/Carers of pre-5 aged children |  |
| Adult disability  |  | Young Carers |  |
| Adult sensory impairment |  | Kinship Carers  |  |
| Victims of abuse/harassment |  | Single Parent Carers |  |
| School behavioural issues |  | Asylum seekers/refugees |  |
| Additional educational needs |  | Minority group  |  |

***I have no concerns for the wellbeing of children or the care of the caravan and I believe this family would benefit from a caravan holiday.***

**Signature of referrer**: ­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_ **Date**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Part 3 - Further Information for Applicants and Referees**

Please contact us by telephone or email us to discuss any particular situation. This application form can be downloaded from our website: [www.glasgowchildrensholidayscheme.org.uk](http://www.glasgowchildrensholidayscheme.org.uk) and emailed to us at admin@glasgowchildrensholidayscheme.org.uk Phone numbers: 07512 825588 (Douglas) or 07515 886822 (Allison).

**Application Process**

Stage 1 - On receipt of an application, the referrer (or applicant) will be sent an email or text confirming receipt of application or will be asked for further information generally within 7 working days of receipt of the application.

Stage 2 - If a holiday is allocated, an initial letter making an offer of a holiday will be sent to the applicant with a copy to the referrer around 6-8 weeks prior to the start date of the holiday. The applicant is asked to promptly phone, text or email their acceptance of the offer.

Stage 3 - On receipt of the acceptance, a second and final confirmation letter is sent with full holiday information details.

If, at any time, the family or referrer realises they are unable to go on the holiday please advise us immediately so that we may re-allocate the holiday to another family.

**Part 4 - Data Protection and Privacy Notice**

Glasgow Children’s Holiday Scheme (GCHS) take your privacy seriously and will only use your personal information to administer your holiday application, extract anonymized demographic and performance information and to provide services you have requested from us. From time to time, however, we would like to contact you for feedback on your experience in dealing with us and your holiday. If you consent to us contacting you for this purpose

**please tick to say how you would like us to contact you**: Post  Email  Telephone 

Our data protection and privacy policy can be accessed on our website at [www.glasgowchildrensholidayscheme.org.uk](http://www.glasgowchildrensholidayscheme.org.uk) and for any further information please contact the Coordinator, GCHS, Suite 114, Pentagon Centre, 36 Washington St, Glasgow, G3 8AZ; by phone on 0141 248 7255 or by email at admin@glasgowchildrensholidayscheme.org.uk

**OFFICE USE ONLY**

Date received………………………………………….. Date application acknowledged ………………..……………………………………………..

Reference checked? Yes / No / Comments ……………...………………………………………………………………………………………………..

Previously Applied? Yes / No If yes, dates ………………….…………………………………………………………………………………………………

Caravan Allocated? Yes / No If yes, holiday dates / caravan ………………………………………………………………………………………..

Local Authority Area \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ SIMD Postcode Yes / No