**DIGITAL INCLUSION SCHEME APPLICATION FORM**

SW9 Community Housing have a limited amount of IT equipment to help residents get online. If you are over 18 years of age and are finding that your course of study, training, job search or home learning for your child is becoming difficult due to the lack of a suitable digital device, we encourage you to apply.

**The Digital Inclusion scheme allows you to apply for either a laptop or Mobile WiFi (allowing internet use for a period of 3 months).**

**Who is eligible?**

* SW9 Community Housing residents only (Network Homes is your landlord)
* Aged 18+
* In receipt of Universal Credit, Employment Support Allowance or have a household income of £25,000 or less
* You are unemployed and actively seeking work
* You have two or more dependants that are currently home-learning

**We cannot promise digital equipment for all applicants. We will be issuing equipment based on a full assessment of personal needs.**

**How to apply:**

Complete this application form and email Komal Doan, Community Engagement & Communications Manager to getinvolved@sw9.org.uk

Incomplete application forms (or lack of relevant documentary evidence) will result in delays when carrying out a full assessment of your needs.

If your application is approved and you have been successful in securing a laptop or mobile Wi-Fi, we will contact you to arrange collection of the device(s).

Please note that the laptop will be gifted to you. Therefore, you will **not** be asked to return the device.

If you have secured mobile Wi-Fi, SW9 will cover the costs for three months only. After this time it will be your responsibility to ensure the upkeep of the service if you wish to continue usage.

**Please answer all questions and sign the declaration on page three of the application form. Please attach evidence as required. Failure to provide this will delay your application.**

**If you need help in completing this form, please email:** getinvolved@sw9.org.uk

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| **Your Details** |
| **First Name** |  | **Surname** |  |
| **Address** |  | **Telephone**  |  |
| **Email**  |  |

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| **Do you have dependants?** |
|  Yes 🞏 No 🞏 |

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| **If yes, please provide the following details about your dependants:** |
| **Name** | **Age** | **Relationship to you** |
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| **Please describe how the equipment will assist you?** |
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| **Which item are you applying for** |
|  Laptop 🞏 Mobile WiFi 🞏 |

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| **Please confirm you are:** *\*you must meet these criteria’s* |
| \*SW9 Community Housing Resident 🞏  \*Aged 18+ 🞏In receipt of Universal Credit, Employment Support Allowance or have a household income of £25,000 or less 🞏Unemployed and actively seeking work 🞏Living with two or more dependants who are currently home-learning 🞏 *(Please note: we may require supporting evidence)* |
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| **Declaration** |
| * I certify that the above information provided is correct.
* I agree to notify the Community Engagement & Communications Manager of any changes in my circumstances which may affect my eligibility for the award as soon as this occurs. I understand that failure to do this may mean that SW9 Community Housing may request the return of equipment.
* I understand that SW9 Community Housing will reclaim the equipment if I have given misleading or inaccurate information intentionally. I recognise that false statements can leave me open to prosecution.
* I understand I can only present one application per household.
* I understand that SW9 Community Housing reserves the right to review and adjust my application.
* I understand that after three month Mobile WiFi payment will be my responsibility.
* I will be willing provide feedback on how the equipment has made a difference if my application is approved.
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| **I have read and understood this declaration**  |
| **Signature** |  | **Date** |  |

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| **OFFICE USE ONLY** |
| **Date Application Received**  |  | **Officer Name** |  |
| **Items Approved** | Laptop 🞏 WiFi 🞏 |
| **Details of Device** | Laptop |  |
| WiFi |  |
| **Reason for Rejection / Other Comments** |  |
| **Date Resident Informed of Decision** | Date:Method of Communication: |
| **Officer Signature**  |  | **Date** |  |