



**PUBLIC RURAL CRISIS FUND (PRCF)
GENERAL FINANCIAL ASSISTANCE FORM**
(The information provided will remain confidential)

Important notes:

1. QCWA is a not-for-profit organisation, and funds are limited; not all applications are successful.
2. PRCF applications may take up to four (4) weeks to be assessed.
3. Please check the terms and conditions on the back of this form before submitting.

Section 1: About you and your situation	My Financial Assistance Application		
	Full name:		
	Address:		
			Post Code:
	Marital Status:		
	No. of dependants or additional household members resident at same address:		
	Telephone:	Home:	Mobile:
	Email address:		
	Employment Status:		
	Are you a Property Owner or do you Rent? <input type="checkbox"/> Own <input type="checkbox"/> Rent	Have you received assistance from QCWA in the past? <i>If you have, please provide a brief description (such as when, amount)</i>	
Do you receive Government Funding (e.g., Pension/Child Related Support) <input type="checkbox"/> Yes <input type="checkbox"/> No	Have you received assistance from other? <i>If you have, please provide a brief description (such as what type, where from, frequency, and amount)</i>		
Please fully describe the crisis and the impact this is having on you and your family:			

Section 2: About what financial support you are seeking

My Financial Assistance Application continued ...

- Please complete the section below about what financial funding you might be eligible for.
- Assistance up to maximum of \$500 per family/household is available to eligible applicants.

1. This assistance would be in the form of Woolworths/Coles/IGA Cards or Store Credit in your rural area.
2. If you are seeking this assistance, please indicate the shop or supermarket as listed below. *Please note that no cash advances can be granted.*

- | | | |
|--|--------------------------------|------------------------------|
| <input type="checkbox"/> Woolworths | <input type="checkbox"/> Coles | <input type="checkbox"/> IGA |
| <input type="checkbox"/> Store Credit – Name of Store: | | |

OR

3. If other urgent financial assistance is required such as paying a Chemist/Medical/Dental account, please supply original **UNPAID** accounts, including Biller details with this application. Payments would be made direct to the biller by BPAY or EFT.

Please attach UNPAID invoice or relevant paperwork	Funds required for/or name of service provider	Due Date	Amount

Applicant's Signature:

Date:

Terms & Conditions

1. Proof of current residential address **must** be included with all applications. This should be a copy of the applicants Driver's Licence (front and back). If you do not have a licence, please provide two other forms of identification. The following will be accepted with a current address: a rates notice, water, telephone, or electricity account.
2. As we are a Not-for-Profit organisation, applications may take up to four (4) weeks for assessing.
3. Funds are limited and unfortunately not everyone is successful. All decisions regarding your application are final.
4. Assistance up to maximum of \$500 per family/household is available to eligible applicants.
5. Applications can only be sent once a year (every 12 months) per household.
6. All applicants will receive correspondence from QCWA either via email or letter in the mail advising if you were successful or unsuccessful.

Please return your completed, signed application, along with the appropriate supporting documents to:

The Queensland Country Women's Association
Attention: State President – Confidential PRCF
11 Cleveland Street Stones Corner Qld 4120
Email: prcf@qcwa.org.au