

## **Application for the J4CS Hardship Fund**

If you have participated in the supervisions boycott called by UCU at the 31 Cambridge Colleges and you have lost income as a result, you may be entitled to apply for a hardship payment. In the first instance ensure you have read the **J4CS Hardship Fund general information** document and the **J4CS Hardship Fund guidance for members** document before you make a claim. All documentation relevant to the J4CS Hardship Fund is [on our branch website](#).

To apply to the J4CS Hardship Fund, please complete the form below, print and sign and then return it by email (scanned copy) to [hardshipfund@ucu.cam.ac.uk](mailto:hardshipfund@ucu.cam.ac.uk) or by UMS/hand to CUCU, Room S10, 17 Mill Lane, Cambridge, CB2 1RX, marked Private & Confidential. **If you send the form by UMS please notify us that you have done so by email** ([hardshipfund@ucu.cam.ac.uk](mailto:hardshipfund@ucu.cam.ac.uk)).

**You will also need to attach scanned copies of the evidence you wish to provide.** Without these, your application may not be considered.

<b>1</b>	<b>Forenames</b>	
<b>2</b>	<b>Last name</b>	
<b>3</b>	<b>Daytime Contact Number</b>	
<b>4</b>	<b>Email Address</b>	
<b>5</b>	<b>UCU Membership number</b> <i>(if known)</i>	
<b>6</b>	<b>Worker type</b> <i>Please circle as applicable. If you have selected Other, please add details of your role.</i>	<i>PGR (with/without stipend) / Freelancer / Fixed-term staff / Self Employed / Other: _____</i>  <i>Part Time / Full Time</i>
<b>7</b>	<b>On average, how many hours would you spend holding Supervisions <i>per term</i></b>	
<b>8</b>	<b>Do you have any other income other than from Supervisions?</b>	<i>Yes / No - Please summarise here in addition to attaching document evidence.</i>
<b>9</b>	<b>Term where Supervisions were NOT undertaken</b>	<i>Please list dates:</i>
<b>10</b>	<b>Number of hours of missed Supervisions this claim</b>	<i>Evidence must support all hours claimed.</i>  <i>Total:</i>
<b>11</b>	<b>Are you the sole earner in your household?</b>	<i>Yes / No - Please summarise here.</i>
<b>12</b>	<b>Do you have caring responsibilities?</b>	<i>Yes / No - Please summarise here.</i>

<b>13</b>	<b>Bank name (please PRINT)</b>	
<b>14</b>	<b>Account Name (please PRINT)</b>	
<b>15</b>	<b>Account number</b>	
<b>16</b>	<b>Sort Code</b>	
<b>17</b>	<p><b>Do you want to claim special circumstances?</b>  <i>If applicable, please provide detail of special circumstances here. For example, risk of essential bill such as mortgage or rent being missed, or if more than one household earner is facing hardship as a result of boycott action taken. For further details, please consult the JACS Hardship Fund Guidelines.</i></p>	<i>Yes / No - Please summarise here in addition to attaching document evidence.</i>
<b>18</b>	<p><b>Does your claim for special circumstances require advance payment of funding?</b>  <i>For example, if the usual turnaround for payment (at least 3 weeks after providing evidence of lost income) would result in a missed essential bill payment or unauthorised overdraft use.</i></p>	<i>Yes / No - Please summarise here in addition to attaching document evidence.</i>
<b>19</b>	<p><b>Have you uploaded a scanned copy of all evidence showing loss of income AND any additional evidence of essential bill costs (childcare etc)?</b></p>	<i>Yes / No - Please note that your application may not be considered if you do not follow this step.</i>

**Declaration** – I confirm that:

- I boycotted planned supervisions on the dates specified.
- My UCU membership is current and paid at the correct rate.
- The total amount of my claim is not greater than my lost income.
- The information I have provided in this form is correct.

Signed:

Print:

Date: