



ARMY RELIEF TRUST FUND

HARDSHIP GRANT APPLICATION

Applicant

Please complete every section of the grant application that is applicable to your circumstances, ensuring that all details are accurate and correct.

Personal Details

- Family name*
- Given name(s)*
- Date of birth*
- Mobile phone number*
- Personal email address*
- Home address*

Service Details

- PM Keys (if known)*
- Rank (current or previous)*
- Service commitment
- Date service commenced*
- Date of separation*
- Provide a description of your, or your spouses, service history i.e. periods of full-time/part-time service*

Hardship Details

- Amount of funding sought*
- Date required by
- Details of where any payment can be directed (*if endorsed by Trustees*)*
- Please include copies of bills to be paid with this application**

Hardship Details *(continued)*

Provide a detailed summation of the circumstances leading to the application*

Describe your extenuating financial circumstances (*income/expenditure and assets/liabilities*)*

Applicant Signature

- If applicable, please attached any supporting documentation that will assist your application.

Comments

Signature:

Date:

Email completed Hardship Grant Application to
ahq.artf@defence.gov.au