



VIET NAM VETERANS & THEIR FAMILIES TRUST (VNVFT)

APPLICATION INFORMATION

HISTORY OF THE TRUST

The Viet Nam Veterans and Their Families Trust (VNVFT) was established on 16 August 2007 by the Government and Veterans' organisations. The Trust is in addition to existing entitlements under the War Pensions Act, including War Disablement Pensions.

The Trust was established with a capital endowment of \$7 million for a 30 year period. The net income derived from that sum will be available for distribution to veterans and their families.

OBJECTIVE OF THE TRUST

To provide support to New Zealand Viet Nam Veterans and their families in relation to concerns and hardship circumstances not addressed elsewhere.

ADMINISTRATION OF THE TRUST

While the Trust is administered by the Department of Internal Affairs, it is independent of the Crown with strong accountability links to the veterans themselves. Trustees are chosen from veterans' groups with a Chairperson appointed by the Government. Applications to the Trust will be considered by the Trustees.

ELIGIBILITY FOR CONSIDERATION BY THE TRUST

Applicants must be New Zealand Viet Nam Veterans or family members of New Zealand Viet Nam Veterans.

Assistance funding requested must be consistent with the criteria laid down in the Trust Deed. You can find the Trust Deed on www.companies.govt.nz.

HOW THE TRUST WORKS

Payments from the Trust to beneficiaries are intended to be mainly for **“the relief from poverty or hardship”** of veterans and their families, rather than for compensation or reparation, which are addressed elsewhere in various measures which have been announced by the Government.

Each case is treated on its merits, with the Trustees having the flexibility and discretion to approve grants on a case by case basis, within the overall “relief from poverty or hardship” criterion.

The Trust will not assist in capital investments or similar, such as the purchase of land or buildings.

Grants will normally be one-off payments, and therefore beneficiaries should not count on on-going financial support from the Trust. However, depending on the circumstances, and the number and priority of other applications, there is nothing to stop any beneficiary making a further application for assistance to the Trust.

The decisions of the Trustees are final and they will not enter into further discussion or correspondence about any of their decisions, or about the relative merits of any application.

Grants from the Trust may affect Social Security Assistance

Some types of social security assistance are subject to an income or cash asset test. If a person receives a grant from the Trust and is receiving social security assistance, their social security assistance entitlements may be affected.

If a recipient has any questions about the effect of a grant on their entitlement to social security assistance, they should discuss their situation with Work and Income (Phone 0800 559 009).

HOW TO APPLY

There are two forms:

- an **Application Form (A)**; and
- a **Support Person Reference Form (B)**.

For both forms:

- Print as neatly as you can and use a **BLACK** pen. Black ink photocopies better and the Trustees each need a copy, and don't have young people's keen eyesight any longer. It simply makes processing the application easier.
- Don't use binders or folders. They have to be taken apart to photocopy.
- Don't fax material. It is hard to read and can go astray.
- Don't feel you have to provide a lot of additional material. In most cases the two forms will give the Trustees what they need to make a decision. If they need more they can ask for it.
- Don't send us original documents such as birth certificates, as we will be keeping all paperwork. Copies are acceptable.

(A) Application Form

A person applying for a grant from the Trust can:

- Fill in the Application Form themselves; or
- Have someone fill it in for them. (This might be a welfare officer, kaumatua, caregiver or advocate for example).

In all cases:

- The person applying should sign the form even if someone else has filled it out for them. (The Trustees want to be sure that he or she is happy to have an application made out for them).
- The applicant and the person filling out the form on their behalf are responsible for the accuracy and honesty of the information provided in the form.
- Provide all the information asked for. It is there for a purpose and missing information could hold up the processing.

(B) Support Person Reference Form

- An applicant doesn't have to have this form filled in, but it is encouraged. It will help speed up the processing of the application.
- If it hasn't been filled in, the Trustees might ask for it to be completed.

Although the Trustees know many of the applicants, as they are part of the Viet Nam veterans' community, there are inevitably some who are not well known to them. This form enables a welfare officer, other advocate or independent person who knows the applicant's situation, to provide some supporting information or endorsement of the request for funding.

As with the main Application Form, the person filling out the form is responsible for the honesty and accuracy of the information provided.

Please send the completed application to:

Mail -

**Trust Advisor
V N V & Families Trust
c/- Department of Internal Affairs
PO Box 805
Wellington**

OR

Our courier delivery address is -

Level 9, TSB Building
46 Waring Taylor Street
Wellington

For further enquiries, please contact us by telephoning **0800 824 824**

Or by emailing trusts@dia.govt.nz

After the Trust has received your application, you will be sent an acknowledgement letter letting you know when your application will be considered.

All applications will be treated with utmost confidentiality.



APPLICATION FORM

All sections of this application form must be completed.

NAME OF APPLICANT

CONTACT PERSON REGARDING THIS APPLICATION

Name and Postal Address:

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Phone (Work)

Phone (Home)

Fax/email

Mobile

1. The name of the NZ Viet Nam Veteran that that this application relates to.

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Service Number: Unit Served With:

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2. If the applicant is not the NZ Viet Nam Veteran, (such as a wife or child) please provide information that confirms the applicant is related to the Viet Nam Veteran, (ie copy of birth certificate, marriage certificate, death certificate or note from a Welfare Officer/kaumatua).

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3. Have you registered with VANZ? **YES / NO**

4. Have you applied to any other veterans' agency for this help? **YES /NO**

Have you received any funding? **YES / NO**

5. What is your problem? (Reason for application.)
(Give information about your concerns and hardship – please use extra pages if required, and attach copies of other documents that support your application, eg medical certificates, builders' quotes, etc.)

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6. How much money are you seeking? (if you want money for several purposes – list them.)

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7. What will you do with the money? (How will this grant help you?)

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8. If the Trust is unable to fund the full amount requested, would a smaller grant still be of assistance?

YES / NO

If direct credit into a bank account is requested please complete the details below.

Name on Bank Account

Name of Bank

Branch

Full Account Number.....

If paid by cheque – please print name of the person the cheque is to be made out to.

Name

DECLARATION

I certify that to the best of my knowledge the information in this application is complete and correct.

Signature of Applicant: Date:

Signature and Name of person who filled out the form, if not the applicant.

Name: Signature: Date:

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SUPPORT PERSON REFERENCE FORM

This section should be filled out by a person who has sufficient knowledge of the applicant and associated history.

Return this form together with the application to: Trust Advisor, VNV & F Trust, c/- Department of Internal Affairs, PO Box 805, Wellington.

1. Name of Support Person:

2. Postal Address:

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 Phone (Work):

 Phone (Home):

 Mobile:

 Fax/email:

3. Name of applicant this reference is in support of:

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4. Name of New Zealand Viet Nam Veteran this application relates to:

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Service Number: Unit Served With:

5. Please comment on how you have become a support person for the applicant. Include how long you have known the applicant.

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6. Please detail the funding assistance needed by the applicant.

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7. How will any funding provide real help to the applicant?

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8.

“In signing this form I confirm that I have provided the information freely and with consent from the applicant in detailing the need for funding assistance.”

Signature: Date: