



Application form for assistance from The Chartered Certified Accountants' Benevolent Fund (the Benevolent Fund)



Name _____

Address _____

_____ Postcode _____

Tel _____ Date of birth _____ Country of birth _____

E-mail address _____

Marital status _____ Present occupation _____

Name of Member or former Member _____

Membership no

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 Membership period: From _____ To _____

Relationship to Member or former Member _____

How did you hear about the Chartered Certified Accountants' Benevolent Fund?

“Supporting members and their families in times of hardship or need.”

Nature of assistance requested (✓) Grant Loan Any other form (details) _____

Please give details of how much you require and give brief description of what grant/loan would be used towards.

Have you made a previous application for assistance from this Benevolent Fund? If so, give full particulars.

Present state of health of the applicant.

Present state of health of spouse/partner and dependants.

ESTIMATED EXPENDITURE**(for the next 12 months)****Regular Payments****Applicant's
Current Details**

£ Sterling

Local Currency

**Spouse/Partner's
Current Details**

£ Sterling

Local Currency

Household Bills etc.Mortgage repayments

Rent

Insurance

Service Charge

Rates/Council Tax or Local Taxes

Rates or Local Taxes Rebate (if any)

Water and Sewerage Rates (if separate)

Heat and Light

Television Licence

Rented Household Appliances

Telephone

Household Food Bill

GeneralRegular Medical Supplies

Clothing

Paper, periodicals and magazines

Life assurance/Pension

Car Costs (inc. tax, insurance, petrol, services)

Hire Purchase (give details)

Travel expenses e.g. regular visits to hospital

shopping etc.(give details)

Any other regular expenses (give details)

TOTAL REGULAR EXPENDITURE

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Other one-off expenditureHolidays

Household Repairs and maintenance

General Large Purchases (TV, Computer)

Any other one-off expenses (give details)

TOTAL OTHER EXPENDITURE

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**ESTIMATED TOTAL HOUSEHOLD INCOME
(for the next 12 months)**

Regular Income

**Applicant's
Current Details**

£ sterling

Local Currency

**Spouse/Partner's
Current Details**

£ sterling

Local Currency

Employed persons earnings

Self Employed persons earnings

State Pension

Occupational Pension

Supplementary Pension

Income from Property (after expenses)

Income from lodgers/boarders

Regular payments from relative's

Dividends/Interest from Investments or savings

Unemployed benefit

Sickness benefit

Child Benefit

Housing Benefit

Attendance allowance

Mobility allowance

Other state benefits (give details)

Other Charities grants (give details)

Any other source of income (give details)

TOTAL REGULAR INCOME

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One-off Income

Please give details of any one-off grants, gifts, etc.

TOTAL OTHER INCOME

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ASSETS AND LIABILITIES

	Applicant's Current Details		Spouse/Partner's Current Details	
	£ sterling	Local Currency	£ sterling	Local Currency
ASSETS				
Value of any property	_____	_____	_____	_____
Value of stocks and shares owned	_____	_____	_____	_____
Balance in all Bank, Savings, Building Society accounts etc. include ISAs	_____	_____	_____	_____
Value of any motor vehicles (give details eg age, type)	_____	_____	_____	_____
_____	_____	_____	_____	_____
Other assets eg premium bonds (give details)	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
TOTAL ASSETS	=====	=====	=====	=====

DEBTS / LIABILITIES

Amount of mortgage and term outstanding (give details)	_____	_____	_____	_____
Amount of outstanding Loans	_____	_____	_____	_____
Amount of outstanding Credit Cards	_____	_____	_____	_____
Amount of outstanding Hire Purchase	_____	_____	_____	_____
Other liabilities and/or debts (give details)	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
TOTAL DEBTS / LIABILITIES	=====	=====	=====	=====

NET ASSETS

=====	=====	=====	=====
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REPAYMENTS OF DEBTS, LOANS ETC DUE IN NEXT 12 MONTHS

List each debt separately, showing interest and capital if applicable

_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
TOTAL ESTIMATED PAYMENTS	_____	_____	_____	_____

Please use another sheet if required.

Have you applied for or received assistance from any other Society or person? If so, state particulars.

If applicable, have you sought advice from a debt counsellor? If so, state particulars

If applicable, have you taken advice from the Department of Work and Pensions and claimed all State Benefits that you are entitled to?

If applicable, have you reduced your mortgage payments or sought a creditor's agreement? If so, state particulars

Give the name, full address, telephone number and relationship of next of kin.

Give the name, full address and telephone number of a person that may be contacted in an emergency.

Give the name, address and telephone number of a Chartered Certified Accountant, Barrister, Solicitor, Doctor, Clergyman, or other Persons, to whom reference can be made. Two names should be given and the persons referred to should be fully acquainted with your present circumstances. The persons may be contacted for a character reference.

i Name

Address

Occupation

Relationship to applicant

ii Name

Address

Occupation

Relationship to applicant

Please provide any other information you consider helpful in support of your application. Use additional sheets if necessary

Please provide details of the following, if applicable.

Enclosed

- | | |
|---|--------------------------|
| Benefits entitlements | <input type="checkbox"/> |
| Pension currently received | <input type="checkbox"/> |
| Pensions to be received | <input type="checkbox"/> |
| Any Health/Life insurance policies | <input type="checkbox"/> |
| Copies of bills/quotes of a specific item | <input type="checkbox"/> |

PLEASE DO NOT HESITATE TO CONTACT THE SECRETARY OF THE CHARTERED CERTIFIED ACCOUNTANTS' BENEVOLENT FUND SHOULD YOU HAVE ANY QUESTIONS ABOUT THE FORM OR THE SUPPORT AVAILABLE.

DECLARATION/CONSENT

The Chartered Certified Accountants' Benevolent Fund (Benevolent Fund) is committed to safeguarding your privacy and it will take every precaution to protect and ensure the information remains confidential and within the terms of the applicable Data Protection Regulations and all the authorities you give us.

Please read this declaration carefully and sign below to confirm your consent to the use of the information.

- I believe that the details I have given in this form are correct and I will inform the Benevolent Fund as soon as possible of any changes in my circumstances.
- I understand that the information expressed in this form will be kept confidential and only used in relation to the processing of my application.
- I authorise the Benevolent Fund and anyone properly instructed on its behalf to make any enquiries deemed necessary by it in support of my application.
- I consent to the disclosure of any information provided by me to other charities and/or parties who may be contacted in the course of such enquiries. I understand that this process may include enquiries of and disclose of information to any relevant expert or doctor, my General Practitioner, my employer, any referee indicated on this form and any individual or body that can verify the information provided by me in this form.
- I consent to my personal data being processed and maintained by the Benevolent Fund for the purposes of administering my application and I understand that the data will be kept for as long as necessary.

Signature of applicant _____

Date _____

Did the applicant complete the form **Yes** **No**

If the answer is No, please insert name, address and telephone number, including relationship to applicant, below.

DATA PRIVACY NOTICE

The Chartered Certified Accountant's Benevolent fund (Benevolent Fund) may use your personal data for the purposes of;

- application and administration of the Benevolent Fund
- responding to enquiries and investigating complaints
- complying with our regulatory obligations

You can update your information at any time, by contacting the Benevolent Fund administration. We may share information with the Board of Trustees and with our auditors. Please note that for individuals based outside the UK, your information will be held in the Fund's main information systems which are located in the EU.

Your information will be kept as long as necessary to support the Benevolent Fund application and administration process.

For more information on how your information and rights are respected, please see the privacy notice (accaglobal.com/privacy), or contact privacy@accaglobal.com

The Chartered Certified Accountants' Benevolent Fund
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Company registration number 08880293