**The Institute of Financial Accountants &**

**The International Association of Book-keepers**

**BENEVOLENT FUND**

**Registered Charity No: 234082**

 Date

**Please answer all questions and write CLEARLY**

|  |
| --- |
| **Surname**  |
| **Forename(s)**  |
| **Full Postal Address** |
| **Telephone no:** | **Marital Status** | **Date of Birth:** |

**Please list below all dependants in your household**

|  |  |  |
| --- | --- | --- |
| **Name** | **Relationship**(please give age if under 16) | **Employment or Education status at present time** |
|  |  |  |
|  |  |  |
|  |  |  |
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|  |  |  |
|  |  |  |
| **Membership No:****IFA / IAB****(please delete as appropriate)** | **Date Joined:** |
| **IFA / IAB Subscription paid to****date:** (day/month/year)**:** | **Amount of Grant Applied for:**(specify your local currency)  |

**Please give your employment details**

|  |  |  |  |
| --- | --- | --- | --- |
| **From** | **To** | **Position Held** | **Annual Earnings** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**Please give below the income & expenditure for the whole household**

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| --- |
| **Currency of your income:** |
| **Total income for past 12 months** | **Total outgoings for past 12 months** |
| 1. Self – Salary NET:

 1. Partner – salary NET:
 | Food & Housekeeping:  |
| 1. Self – Rental income Gross:
 | Less rental income expenses:Mortgage Agent Repairs Heating Water  |
|  | Insurances  |
|  | Mortgage  |
|  | Rates/Council Tax  |
|  | Travel – bus & train  |
| 1. Other income NET:
 | Other outgoings (please specify): |
| Total  | Total  |
| **Expected income for next 12 months** | **Total outgoings for next 12 months** |
| 1. Self – Salary NET:

 1. Partner – salary NET:
 | Food & Housekeeping |
| 1. Self – Rental income gross
 | Less rental income expenses:Mortgage Agent Repairs Heating Water  |
|  | Clothing |
|  | Mortgage/Rent |

|  |  |
| --- | --- |
|  | Rates/Taxes |
|  | Travel |
| 1. Other income NET:
 | Other outgoings (please specify) |
| **Total**  | **Total**  |

**NB:** Your income and expenditure should be evidenced as fully as possible with bank statements, pay slips, tax return forms, proof of rent/mortgage payments, or any other papers you think may help the Trustees in reaching their decision.

|  |
| --- |
| **Reasons for Application:** |

|  |
| --- |
| **Any other comments:** (continue overleaf if necessary) |

Signed

Date

|  |
| --- |
| **Witnessed by**: Name: ………………………………………………. Address: …………………………………………………………………………………………………….(this person must **not** be a relative of the applicant)Signed: …………………………………..……….. Date ………………………………..…………….. |

**Please return this form to the following address:**

c/o The Secretary, The IFA & IAB Benevolent Fund,

23 Nutbourne Road, Farlington, Portsmouth PO6 1NP