

ABTA-BEN

is all about helping people in need

ABTA-BEN is ABTA's very own charity, established some years ago to provide assistance to those in need and are working, or have worked, for an ABTA member. Decisions regarding that need are reached by the charity's Trustees who meet regularly. To reach fair decisions, as much background information as possible is required-hence this application form.

Please answer fully all those questions that apply in your case and rest assured that all information supplied remains confidential and restricted to the Trustees, as does any subsequent decision regarding assistance. Because your application is photo-copied and distributed to Trustees, it is important it is **completed clearly and using only black ink.**

If there is insufficient space to answer any question, or if you think that additional information will help the Trustees to arrive at a decision, please attach a separate sheet of paper. You should aim to demonstrate you are in need, financially or otherwise.

Who can apply?

a principal, director or any person currently or formerly employed by an ABTA member, either on a full or part-time basis, with in the UK or overseas. The spouse, partner, widow, widower, child or other dependent of that person also qualifies for consideration.

Who cannot apply?

Anyone whose business is experiencing financial or other difficulties cannot be helped by ABTA-BEN.

Additional information

It would help the trustees to consider your application and may save time in reaching a decision, if you would send with this application copies of any appropriate documents. For example, copies of agreements representing either a liability or a benefit.



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Registered Charity No 295819

First part:

some information about you, the applicant

01 your full name _____

02 your current address [street] _____

[town] _____

[postcode] _____

03 contact telephone [daytime] _____

[evening] _____ [is this preferred?]

04 email address _____ [if you have one]

05 date of birth _____

06 are you ___single? ___married? ___divorced? ___separated? ___living with a partner?

[please tick as appropriate]

If married, are you living with your spouse ___yes ___no

If not married, or if divorced or separated, do you contribute or support in any way, your former spouse?

If so, please provide details [as court order, amount, etc] _____

07 date of birth of current spouse or partner: _____

or, if still alive, of former spouse/partner: _____

08 in good health? yourself ___yes ___no
current [or former] spouse/partner ___yes ___no

if not currently in good health, please let us know the nature of the medical condition, when it started and any treatment[s] and any related costs:

yourself: _____

spouse/partner: _____

09 your children [if any]: names _____ ages _____

are any dependant on you? ____yes ____no

details of any educational expenses incurred by you: _____

details of any financial contributions from children living with you: _____

details of any financial contributions from children not living with you, or from other relatives or friends:

please describe any medical condition affecting any of your children, any treatment[s] required, and any
related expenses: _____

Second part:

an overview of your current financial situation:

10 accommodation

do you own the house or flat in which you live? ____yes ____no

if yes, indicate an approximate estimated value: £ _____

and if there is a mortgage, the outstanding balance is approx. £ _____ with _____ years to run and
the current interest rate is _____ %

[Name of Building Society: _____] if no, and rent is
involved, tell us how much in question 13 below.

If living otherwise, please state:

[a] if with friends or relatives, amount contributed per month: £ _____

[b] if in lodgings, a care or nursing home, etc., the amount charged per month: £ _____

11 your other main assets [in your name or your spouse/partner's name]

[a] savings/deposit accounts, ISAs etc: total £ _____

[b] investments, shares etc: total £ _____

[c] other significant assets [vehicles etc]: _____

12 your monthly income & expenditure

please help us to establish the balance between the income received from all sources by you and/or your spouse/partner, and all your outgoing living expenses.

A - Income [monthly]

	yourself	your spouse/partner
from employment [net]	£ _____	£ _____
pension [State-gross before tax]	£ _____	£ _____
pension [private -net after tax]	£ _____	£ _____
social security benefits from DWP etc [please identify]*		
re: _____	£ _____	£ _____
re: _____	£ _____	£ _____
re: _____	£ _____	£ _____
interest [after tax] or dividends from investments #		
	£ _____	£ _____
	_____	_____
MONTHLY TOTALS	£ _____	£ _____

* ie benefits re care and attendance allowances; disability; unemployment, etc

ie deposit accounts and shares, etc as identified above in question 11

B-Expenditure [monthly]

	£ per month	£ arrears [if any]	Comments
Mortgage repayment or rent [see 10]			
Council tax			
Water rates			
Gas			
Electricity			
Insurance premiums [re house/flat, contents, health, etc]			
Telephone [include mobile & internet]			
TV [licence & any related subscriptions]			
Motoring expenses [insurance, petrol, servicing, etc]			
Other travel costs			
Food			
Other housekeeping expenses			
Clothing			
Leisure expenses [holidays etc]			
Property repairs			
Credit/store card repayments [see 14]			
Other 'hire purchase' type repayments [as 'white goods' etc]			
Post-marital maintenance [see also question 6]			
Any other significant expenditure? [please give details]			
TOTALS	£	£	£

C - Summary

my/our total monthly income is £ _____

my/our total outgoings are £ _____

Difference is £ _____

ADDITIONAL COMMENTS REGARDING ABOVE? _____

13 outstanding loans or debts [other than as identified already]

These should be more than two months overdue and, if preferred, can be listed separately. State to whom due, the amount and frequency of repayment and, if any arrears, the sum outstanding, and for how long.

14 employment

if you, your spouse or partner, widow/widower, child or other main dependent is, or was, in the direct employ, either in the UK or overseas, of a current or former ABTA member [or a homeworker under an ABTA number], please list details [earliest employment first]:

name of ABTA member	date joined	date left	job function
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

15 definition of need

the questions in this form are intended to provide ABTA-BEN trustees with the best possible picture of your present circumstances but, in your own words, how could they help you? If that help involved, for example, the purchase of equipment, or repairs, or changes to existing accommodation, etc., please enclose copies of any estimates you already have - this often saves time and can enable a quicker decision.

16 awareness

we are continually trying to make more deserving people aware of ABTA-BEN and would be interested to learn how you heard of the Benevolent Fund?

17 declaration

I confirm that the information given in this application is, to the best of my ability and knowledge, true and accurate in every respect. Where possible I have enclosed supporting documentation.

Signed [as applicant] _____

date _____

ABTA-BEN use only

Application reference _____

Dates _____ [form sent]

_____ [form received back]

_____ [considered]
