

AIA Educational & Benevolent Trust

Application for Educational Support or Benevolent Assistance

Personal Details					
Title:					
Surname/Family Name:					
Given Name(s):					
Membership Number	lembership Period:	From:	To:		
Relationship to Member or former Member (where applicable)					
Home Address:					
Town:	County:				
Post /Zip Code:					
Country:					
Date of Birth:					
Email:					
Telephone:	Home/Work				
Marital Status:					
Current Occupation:					
The Trust has two distinct objectives, please	e select which objec	tive best suits your requir	ements:		
Educational The advancement of public education in accounts.	untancy and related	commercial subjects.			
Benevolent					
The relief in cases of need, hardship or distress registered Students of the AIA, and their spou					

Summary of Request
Nature of assistance requested (\checkmark) \square Grant \square Loan \square Any other form (details)
Please provide full details relating to your application including the circumstances necessitating this application, the cost of assistance you require in £ and a description of what the assistance will be used for/how a successful application would benefit you
£
Description:
Please continue on additional sheet if required
Have you applied for or received assistance from any other society or person, including the AIA Educational & Benevolent Trust? If so, please provide details.
Please continue on additional cheet if required
Please continue on additional sheet if required

Estimated Expenditure (for the next 12 months)	Applicant's Details		Spouse / Partner's Details	
	£ Sterling	Local Currency	£ Sterling	Local Currency
Regular Household Payments				
Mortgage Repayment				
Rent				
Insurance				
Service Charge				
Rates or Local Taxes				
Water Rates				
Heating & Lighting				
Television License / Satellite / Cable Fees				
Rented Household Appliances				
Telephones (Landline and Mobiles)				
Household Fuel				
General Payments				
Medical				
Clothing				
Papers and Magazines				
Life Assurance and Pensions				
Car (Tax, Insurance, Fuel & Maintenance)				
Hire Purchase (Give Details)				

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Loan Repayments (Give Details)		
Credit / Store Card Payments		
Travel Expenses (Give Details)		
Any Other Regular Expenses (Give Details)		
One-Off Payments		
Holidays		
Repairs		
General Large Purchases (Give Details)		
Any Other One-Off Expenses (Give Details)		
Total Estimated Expenditure		

Estimated Income (for the next 12 months)	Applicant's Details		Spouse / Partner's Details	
	£ Sterling	Local Currency	£ Sterling	Local Currency
Regular Income				
Employed Person's Earnings				
Self-Employed Person's Earnings				
State Pension				
Occupational Pension				
Income from Property (After Expenses)				
Income from Lodgers / Borders				
Regular Payments from Relatives				
Dividends / Interest from Investment / Savings				
Unemployment Benefit				
Sickness Benefit				
Child Benefit				
Housing Benefit				
Attendance Benefit				
Mobility Allowance				
Other State Benefit (Give Details)				
Other Charities' Grants (Give Details)				
Any Other Regular Income (Give Details)				

Any One-Off Grants, Gifts Etc. (Give Details)		
Total Estimated Income		
Assets and Liabilities		
Value of Property		
Value of Stocks and Shares Owned		
Balance in Bank and Savings Accounts		
Other Assets (Give Details)		
Amount of Mortgage and Term Outstanding (Give Details)		
Amount of Outstanding Loans		
Amount of Outstanding Credit Cards		
Amount of Outstanding Hire Purchase		
Other Liabilities (Give Details		
Total Assets Less Liabilities		

Name	Age	Relationship	Contribution (£)	Career √/x

Have you taken advice from Counsellors or other Professional advisors to ensure you have claimed all state benefits you are entitled to? If so, please provide details.				

Give the name, full address, email address and telephone number of a Member of the AIA or other Professional 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 circumstances. These persons may be contacted, prior to a Trustees meeting, for a character reference.

Referee 1	Referee 2
Name:	Name:
Occupation:	Occupation:
Address:	Address:
Town:	Town:
County:	County:
Post /Zip Code:	Post /Zip Code:
Country:	Country:
Relationship to Applicant:	Relationship to Applicant:

Documentation			
Please provide details of the following, if applicable:			
	Enclosed?		
Benefits entitlements			
Pension currently received			
Pensions to be received			
Any Health/Life insurance policies			
Copies of bills/quotes of a specific item			
Please list any additional documents you have	provided with your application:		

Declaration / Consent

The AIA Educational and Benevolent Trust ("the Trust") is committed to safeguarding your privacy and will take every precaution to protect and ensure the information you provide remains confidential and within the terms of the applicable Data Protection Regulations and all the authorities you give.

Please read this declaration carefully and sign below to confirm your consent to use of the information (typed signature are acceptable).

- I believe that the details I have given in this form are correct and I will inform the Trust 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 Trust 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/parties who may
 be contacted during such enquiries. I understand that this process may include enquiries of and
 disclosure 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 Trust for the purposes of administering my application and I understand that the data will be kept for as long as necessary.

Sig	nature of Applicant:		
Da	te:		
Di	I the applicant complete the form (\checkmark)	Yes □	No □
	the answer to the above is 'No', please prumber below and state the relationship to		full address, e-mail address and telephone

PLEASE SEND YOUR COMPLETED APPLICATION FORM TO:

The AIA Educational and Benevolent Trust, Staithes 3, The Watermark, Metro Riverside, Newcastle Upon Tyne, NE11 9SN

Or submit via email to trust.fund@aiaworldwide.com.

Your application will usually be acknowledged within 7 days of receipt of your correctly completed application form.

DATA PRIVACY NOTICE

The AIA Educational & Benevolent Trust ("the Trust") may use your personal data for the purposes of:

- the operation of the Trust
- responding to enquiries and investigating complaints
- complying with our regulatory obligations

You can update your information at any time, by contacting the Trust Administrator. We may share information with the Trustees. Please note that for individuals based outside the United Kingdom, your information will be held in the Trust's main information systems which are located in the United Kingdom.

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

For more information on how your information and rights are respected, please see the privacy notice www.aiaworldwide.com/privacy.

www.aiaworldwide.com/charity

Registered Charity in England and Wales 1118333



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