



RSABI, Rural Centre, West Mains, Ingliston, Newbridge. EH28 8NZ
0300 111 4166
Scottish Charity No. SC009828

Application

1. Applicant details

Title.....Surname.....First Name.....

Address.....

.....

Post Code..... Telephone no..... Email.....

Date of Birth.....

Type of Accommodation:If Other please state.

Employment: If Other please state.

Marital status..... Spouse/Partner Name.....

Spouse Date of Birth Age.....

Spouse Employment status.....

Have you or your spouse worked in any other industry or HM Forces.....

Details of dependent children

Name	Age	Relationship to applicant

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People who live with you-other adults including non-dependent children

Name	Age	Relationship to applicant	Occupation	Monthly income if known	Contribution to household

Does applicant or partner/spouse/children have any health issues?

If yes please give details.....
.....
.....

2. Eligible Person's Details (if not Applicant)

Title.....Surname.....First Name.....

Date of Birth..... Date of Death (if applicable)

What is the applicant's relationship/dependency to the person with whom eligibility is based?

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.....
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How did you hear about RSABI?

Have you organised Power of Attorney?.....

Have you made a Will? Yes/No.....

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3. Employment History of the person that eligibility is based

Employment type: Employed/self employed

1. Type of business.....

From To..... Role.....

Name of owner/manager/agent

Address.....

Brief description of role and duties.....

Employment type: Employed/self employed

2. Type of business.....

From To..... Role.....

Name of owner/manager/agent

Address.....

Brief description of role and duties.....

Employment type: Employed/self employed

3. Type of business.....

From To..... Role.....

Name of owner/manager/agent

Address.....

Brief description of role and duties.....

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Please continue on a separate sheet if necessary

Brief work history of spouse/partner

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To be completed by self-employed currently in business

Holding/BRN/Not App..... or Registers of Crofts

How many hectares/acres are: Owned..... Rented.....Seasonal Grazing.....

Type of farm/business.....

Is your business registered with HMRC?

Any other business interests i.e. holiday lets/contracting

If yes please specify.....

Business account balance £.....cr/dr Overdraft facility limit £.....

What difficulties is your business facing at this time?

How is this affecting you personally?

RSABI will require copies of business accounts/HMRC returns covering the last 3 years.

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4. Personal Finances

Apart from your home do you own any other land or property that is not for business or personal use?

If yes please supply details and approximate value.....
.....
.....

Please complete the following

Savings	Name of account holder	Balance £
Bank/current accounts		
Savings accounts		
Building Society accounts		
Stocks and shares		
ISA		
Other		

Do you have any other assets? If yes please give details

.....
.....

Bank Account Information

Name of Account Holder

Type of Account

Sort Code..... Account no.....

Bank/Building Society Name.....

Address.....
.....

Any payments you receive from RSABI will normally be paid direct into your bank account as detailed above.

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Please complete the following income and expenditure sheet for your household finances. Bank statements can be helpful. Please note that any expenditure paid through a current business should not be included in the statement below.

Income	Monthly £
Wages/Salary /Drawings	
Partners income	
Benefits- ESA/Income Support/JSA/Universal Credit/State Pension	
Child Tax Credits	
Child Benefit	
Working Tax Credits	
Private Pensions	
Housing Benefit	
Disability benefits AA/PIP/DLA	
Other	
TOTAL INCOME (A)	
Household Expenses/Outgoings	
Rent /Mortgage	
Council Tax	
Electric	
Gas/Coal/Oil/Other	
Water	
Food	
Household/Cleaning	
Cigarettes/Alcohol/Leisure/Haircuts	
Pets - Food/Vets/Insurance	
Insurance - Life/home	
School meals	
Travel costs – bus/fuel/taxis	
Car costs MOT/Insurance/Repairs	
Mobile phone	
Telephone/ Broadband	
TV Package	
TV Rental/Licence	
Clothing	
Gifts-birthdays/Xmas	
Kids clubs	
Holidays	
Debt repayments	
Others –Please list	
TOTAL EXPENSES (B)	

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5. Reason for Application

Please tell us as much as you can about your current circumstances and how RSABI might be able to help.



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6. Emergency and Next of Kin Information

Please give the name of a relative, friend or other person we could contact if necessary.

Name.....

Address.....

.....

Post Code.....Telephone.....

Relationship.....

7. Proof of Identity and Income (Evidence)

To be able to process your application we will need the following;

Identity (one of the following)

Birth Certificate

Marriage Certificate

Passport

Driving Licence

Address (one of the following)

Council Tax demand

Driving Licence

Bank Statement

Verification of Income

Payslips (most recent 3)

Bank statements (last 3 months)

Benefit award letters (if payable)

Last 3 year's business accounts (for working farmers and crofters)

Proof of business with HMRC

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8. Data Protection and Declaration

When you apply to RSABI for assistance, we need to ask for personal information about you so we can ascertain whether or not you are eligible for help. We will keep such information (and any further information provided in connection with any ongoing support provided by RSABI to you) strictly confidential. We will not pass your details to any other person or organisation for any reason, except where we are required to do so by law.

The personal information on this application, and any further personal information and documents received, will be used by RSABI in connection with your application for assistance, in connection with any ongoing support provided by RSABI to you and for accounting and audit purposes. We may disclose general information in our Annual Report and in other RSABI publications and media about the support provided to our beneficiaries.

Under data protection we are required to tell you what information we hold on you and how that information will be used.

Please tick in the boxes to show you have read and agree to the following:

- In accordance with data protection legislation, I consent to RSABI holding and using the information on this application, and any further information and documents received, for the purpose stated above.
- I declare that the information I have provided is true and accurate, to the best of my knowledge
- I undertake to inform RSABI of any changes in my circumstances that may affect any decision to provide support to me at any time
- I confirm that I am a UK tax resident and not tax resident elsewhere, or a US citizen
- I agree that I may be contacted to be asked for feedback regarding my contact with RSABI

I would like to receive RSABI newsletters and Christmas card order forms Yes/No

Signed.....Date

Signed.....Date

Please return this completed form and evidence to The Welfare Manager, RSABI, The Rural Centre, West Mains, Ingliston, Newbridge. EH28 8NZ.