

CONFIDENTIAL when completed

Financial Assistance Application Form – Form B

This application is for one-off financial assistance totalling less than £750. This application cannot be used to seek assistance with non-priority debts, legal costs, property adaptations, care costs or assistance with care or mobility equipment. Other forms of assistance can be accessed by calling 0300 102 1919



Section 1 – Applicant and Household Details

Forename		Surname	
Address		Town	
Postcode		Contact Number	
Email Address		Date of Birth	
Relationship to the person who served in the RAF			
Have you had previous assistance from the RAFBF			

HOUSEHOLD DETAILS - please provide details of anyone else resident in your household:

Relationship to applicant	Employed/Unemployed/Education/Full Time Carer

ACCOMMODATION TYPE – please select below:

Owned/Mortgage Shared Ownership Rented Local Authority/Housing Association Rented Private

OTHER ASSISTANCE: Please give us details of any other charities or statutory sources of help you have approached and the help they have provided you (e.g. local council, Citizens Advice, StepChange etc):

--

Section 2 – RAF Service Details

Please provide the details of the individual who served in the RAF. If this is not you, please check our eligibility criteria by clicking [HERE](#). If you are unable to provide documentary evidence of RAF service, you will be sent a separate form after we have assessed your application. Once returned, we will share this with the RAF to confirm service. **If you are unsure on the full dates of service please use 01/01/YYYY, do not leave blank.**

Forename [when serving]			
Surname [when serving]			
Date of Birth			
Date of Service – Start Date		End Date	
Service Number			
National Insurance Number			

Section 3 – Weekly Household Finances

Please ensure that this section details the **WEEKLY HOUSEHOLD** income, not just that of the applicants. Please ensure you are able to provide proof of income confirming the figures given below.

WEEKLY INCOME	SELF £	PARTNER £	OTHER HOUSEHOLD £
Employment wage (net figure after tax)			
Statutory Sick Pay			
Income from other source			
PENSIONS			
Occupational Pension			
RAF Service Pension			
State Pension			
War Disablement Pension			
War Widow's Pension			
Widow's Pension/Bereavement Allowance			
Pension Credit Guarantee			
Pension Savings Credit			
STATUTORY BENEFITS			
Universal Credit (please provide statement detailing all elements)			
Housing Benefit			
Carer's Allowance			
Employment Support Allowance			
Industrial Injuries Benefit			
Working Tax Credit			
Child Tax Credit/Universal Credit Child Element			
Child Maintenance Payments			
Child Benefit			
Attendance Allowance			
Disability Living Allowance – Living			
Disability Living Allowance – Mobility			
Personal Independence Payments – Living			
Personal Independence Payments – Mobility			
WEEKLY HOUSEHOLD EXPENDITURE			HOUSEHOLD
Mortgage or Rent (combined if shared ownership)			
Council Tax (net any reduction)			
Gas/Oil			
Electricity			
Water			
Housekeeping			
Car Costs (MOT/running costs)			
Other Travel Costs			
Child Care			
Home Care/Domiciliary Care Costs			
Debt Repayment (total)			
PRIORITY DEBT	OUTSTANDING (HOUSEHOLD) £	SAVINGS	HOUSEHOLD £
Rent/Mortgage Arrears		Total in Current Accounts	
Council Tax Arrears		Total in Savings Accounts	
Gas/Oil Arrears		Premium Bonds	
Electricity Arrears		Shares/ISAs	
TV Licence Arrears		Other Capital	
Magistrates Fine Arrears			

BANK DETAILS - please provide details of a UK bank account into which any grant can be paid. This account must be in the name of the applicant and these account details must be confirmed on the bank statement that supports this application:

Account Name	
Account Number	
Account Sort Code	
Bank Name	

Section 4 – Reason for Application

Please explain to us the reason for your application and how you would like the RAF Benevolent Fund to help. Please include information about the current state of health in your household, let us know about any injury or illness. Please also include details regarding your employment (if applicable) and how your current circumstances came about. If you are asking for the purchase of an item, please detail this and supply a quotation along with the application. Please note that this application is designed for one-off temporary support. For ongoing issues, we will forward your case to a caseworking organisation (either the RAF Association or SSAFA) who will work with you to resolve the issue and help you access support.

- 1) Immediate Circumstances** – please tell us about your current circumstances, how they came about and how we can help you:

Do you know the value of the assistance you are seeking? If so, please enter here (£):

- 2) Health** – please tell us about your current state of health and that of those in your household, and how this may be affected by or affecting your current circumstances:

- 3) Environment & Resources** - please tell us about your housing situation, employment situation, and other resources available to support you:

- 4) **Funeral Costs** – if your application relates to help with funeral costs for a member of the RAF Family please confirm the relationship of the deceased to the individual who served in the RAF. Please confirm the outcome of an application to the government’s DWP Social Fund for a Funeral Payment and please explain what fees have already been paid to the funeral director and what amount is outstanding. Please ensure an invoice detailing clearly the outstanding amount owed is attached to the application.

- 5) **Other Information** – is there any other information relevant to your circumstances that you feel we should know.

APPLICATION CHECKLIST – it is important to provide us with supporting documents to enable us to process your application. The documents we can accept are listed below. If you do not have proof of RAF service relating to the person named in section 2, we will send you a separate form so we can undertake a basic service check with the Royal Air Force – please note that these checks can take up to a month to complete and are outside the control of the RAF Benevolent Fund.

Proof of ID

(This can be any form of official government issued photo ID (e.g. Driving Licence, Passport, Bus Pass))

One Month’s Bank Statement

(must be dated within the last three months and clearly show account name, number and sort code)

Universal Credit Statement/Benefits Letter/Wage Slip

Proof of RAF Service

Quotation/Evidence of Priority Debt/Invoice

(if seeking support with living costs this is not required)

IMPORTANT – Please mark all supporting documents with the name of the applicant and attach them, along with this application, to an email and send to welfareservices@rafbf.org.uk. To help us identify your application please type FORM B APPLICATION and your NAME in the subject line of the email.

We are not responsible for the security of any emails you send to us while they are in transit.

We recommend that you encrypt your email. If you password protect your application form and supporting documents, you will need to send us a separate email containing the password(s), **otherwise we will not be able to access the documents and process your application.**

Section 5 –Data Protection and Declaration

Applicant

Data Protection:

The RAF Benevolent Fund is committed to ensuring that we handle all data which we hold about you, in a safe, secure and responsible manner and in accordance with the General Data Protection Regulation 2016 (GDPR) and Data Protection Act 2018.

Please ensure you have downloaded and read the ‘Welfare Online Application Privacy Notice’ which tells you how we will use, manage and store the personal data you have submitted in relation to this application.

Please tick this box if you agree to the RAF Benevolent Fund processing your personal data, including special category data, for the purpose of assessing this application for assistance:

Declaration:

I agree that:

- all the information provided in the application form is true and correct, and is a full disclosure of all income, capital, savings and Investments has been made.
- I will inform the RAF Benevolent Fund of any change in my circumstances during the application process.
- the RAF Benevolent Fund reserves the right to undertake basic checks to confirm the veracity of the information provided.
- everyone whose details are included on this form have read, understood and agreed to the above declarations.
- if I am awarded funds to purchase a specific item, I will keep the receipt as proof of purchase and will provide a copy to the RAF Benevolent if requested to do so.

I agree Yes No

Now, please make sure you follow the instructions given in the Application Checklist above and ensure the completed application form and all supporting documentation is emailed to us at welfareservices@rafbf.org.uk

Applicants Name	
Date	

NOTES FOR AGENCIES ONLY – if this application is being submitted through an agency/welfare organisation then you must provide your details below and complete the section explaining how you are assisting the applicant. This will help us process the application.

We will communicate directly with the applicant unless your support is needed. We will notify you when a final decision is made. A copy of our final decision will be sent to you as the referral agency.

Name of Organisation	
Contact Name	
Position	
Address	
Email	
Telephone	

Please explain what assistance your agency is providing to the applicant