

## ROYAL OPERA HOUSE BENEVOLENT FUND APPLICATION FORM

|                         |   |               |
|-------------------------|---|---------------|
| Surname                 | Title (Mr, Mrs, Miss, Ms)               | Date of Birth |
| Forenames               | If Dependant - relationship to Employee |               |
| Address                 | ROH Department/Position                 |               |
|                         | ROH Years of Service                    |               |
| Telephone No.           | Other Dependants (with ages)            |               |
| Email:                  | Nat.Ins.No:                             |               |
| Houseowner/Tenant/Other | Next of Kin (Name & Contact Details)    |               |

| Income                            |   |            |            | Expenses                            |   |            |            |
|-----------------------------------|---|------------|------------|-------------------------------------|---|------------|------------|
| 1                                 |   |            |            | 1                                   |   |            |            |
| Details                           | £ | W/M<br>Q/A | Office Use | Details                             | £ | W/M<br>Q/A | Office Use |
| Earnings (Net of Tax)             |   |            |            | Rent (after any benefits)           |   | 2          |            |
| State Pension                     |   |            |            | Mortgage (after any benefits)       |   |            |            |
| Private Pension                   |   |            |            | Council Tax (after any benefits)    |   | 2          |            |
| Dependant's Earnings (Net of Tax) |   |            |            | Water Rates                         |   |            |            |
| Dependant's State Pension         |   |            |            | Ground Rent/Service Charge          |   |            |            |
| Dependant's Private Pension       |   |            |            | Building/Contents Insurance         |   |            |            |
| Pension Credit                    |   |            |            | Gas (annual)                        |   | 3          |            |
| Employment Support Allowance      |   |            |            | Electricity (annual)                |   | 3          |            |
| Jobseekers' Allowance             |   |            |            | Other Fuel (annual)                 |   | 3          |            |
| Housing Benefit                   | 2 |            |            | Telephone                           |   |            |            |
| Council Tax Benefit               | 2 |            |            | TV Rental                           |   |            |            |
| Disability Living Allowance       |   |            |            | Car Expenses/Fares                  |   |            |            |
| Attendance Allowance              |   |            |            | Medical Costs (Dentist, etc.)       |   |            |            |
| Severe Disablement Allowance      |   |            |            | Extra Help (Cleaner, Laundry, etc.) |   |            |            |
| Child Benefit                     |   |            |            | Household Expenses (food/cleaning)  |   |            |            |
| Child Tax Credit                  |   |            |            | Domestic Help                       |   |            |            |
| Working Tax Credit                |   |            |            | School Expenses                     |   |            |            |
| Interest & Dividends from Savings |   |            |            | Any other Outgoings:                |   |            |            |
| Other Income (Excluding ROHBF)    |   |            |            |                                     |   |            |            |
|                                   |   |            |            |                                     |   |            |            |
| Total Income                      |   |            |            | Total Expenses                      |   |            |            |

### Office Use Only

|             |   |                 |   |
|-------------|---|-----------------|---|
| Recommended | £ | Current Allice. | £ |
|-------------|---|-----------------|---|

|            |   |              |   |
|------------|---|--------------|---|
| Net Income | £ | Last Review. | £ |
|------------|---|--------------|---|

### Notes

1. W: Weekly; M: Monthly; Q: Quarterly; A: Annually
2. If you are entitled to Housing Benefit and/or Council Tax Benefit, only enter the amounts you actually receive and/or pay. Some benefits are paid direct to the Council.
3. Please enter the total annual cost – the monthly cost often varies between winter and summer.

Please turn over for additional information details which might help us assess your application.

**Additional Information (if applicable)**

|   |   |
|---|---|
| Assets and/or Savings (please give amounts of any funds held)                       | Outstanding debts (bank loan, overdraft, mortgage arrears, credit cards, etc) |
| Bank Account(s)   | Please give details:  |
| Building Society Account(s)   | Bank  |
| Stocks & Shares   | Mortgage  |
| Any other savings   | Credit Cards  |
|   | Other Debts   |
| Do you own your house/flat? Yes/No<br><i>If Yes, please state approximate value</i> | Any other special needs? (Eg. repairs, replacement of household goods, etc.)  |

|  |
|--|
| Have you made, or are you making an application to any other charity or organization? Yes/No<br><br>If Yes, please give details: |
|--|

The new Data Protection Act requires us to obtain your consent before we can process and maintain the personal data contained in this Application Form. Be assured, everything you tell us will be treated confidentially. We should therefore be grateful if you would sign and date the declaration below:

*The information in this form and on any enclosures is correct to the best of my knowledge and belief. I hereby consent to the personal data contained therein being processed and maintained by the Royal Opera House Benevolent Fund for the purposes of administering any application for an allowance or grant from its charitable funds and/or for the Fund to contact other organisations that may be able to help me. I understand that the Royal Opera House Benevolent Fund will keep this data for as long as is necessary.*

*Should the Fund wish to share this data with any other individuals, relevant bodies and/or charities in order to help meet my needs, I give my consent.*

*Please put a cross here should you not wish the Fund to do this without express permission.*

I have also read and understood the Charity's Privacy Statement and I consent to The Charity collecting and using my data for the purposes described.

Your signature: \_\_\_\_\_

Your name (block capitals): \_\_\_\_\_

Date: \_\_\_\_\_

(Warning: should it be discovered that you have failed to make a full disclosure of all your income and capital, it could jeopardise a regular allowance, one-off grant or any assistance that the ROHBF may offer).

**SIGNATURE:** ..... **DATE:** .....