**British Association of Former United Nations Civil Servants (BAFUNCS) Benevolent Fund**

**Application for assistance (in strictest confidence)**

1. **Personal details of beneficiary** *[see note 1]*

**Name:** …………………………………………………………………………………………………………………………..…………………….…………….

**Date of birth:** Day**:**………………. Month:……………………….. Year:…………………………….

**Email address**:………………………………………………………………………………………………………………………….……..…………………

**Mobile telephone no:** ……………………………………………………**Landline telephone no:** ………………………………….…….…

**Address:**………………………………………………………………………………………………………………………………….…………………………

………………………………………………………………………………………………..Post code:………………………..………………..

1. **Details of United Nations employment: organization, dates of service, where and when?** *[see note 2]*………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………
2. **Are you a member of BAFUNCS?** Yes [ ] No [ ]

1. **If you do not currently live in the United Kingdom (UK) what is your connection to the UK?** *[see note 3]*……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..
2. **Are you applying for a grant or a loan?** *[see note 4]* Grant [ ] Loan [ ]
3. **For whom is this grant or loan requested?** *[see note 5]*
4. Former UN employee [ ]
5. Their spouse [ ] OR c) Their dependant [ ]

Give the name of the former UN employee if not given in section 1:

………………………………………………………………………………………………………………………………………………………………..

1. **Amount of grant/loan requested** *[see note 6] £………………….*
2. **Purpose of grant or loan** *[see note 7]*

…………………………………………………………………………………………………………………………………………………..………………………………………………………………………………………………………………………………………………………………..…………………………………………………………………………………………………………………………………………………………………..…………………………………………………………………………………………………………………………………………………..……………………………………………………………………………………………………………………………………………………………..…………………………………………………………………………………………………………………………………………………………………………………………………....……

1. **Signature of applicant** *[see note 8]***:** ……….……………………………………………………………………………………………………

OR

**If you are applying on the beneficiary’s behalf, please give your:**

Name:…………………………………………………………………………………………………………………………….……………………

Signature: ……………………………………………………………………………………………………………………………………………..

Relationship to beneficiary: …………………………………………………………………………………………………………………..

Contact details: ……………………………………………………………………………………………………………………………………..

1. **Date:** ……………………………………………………………………..

1. **Comment from the BAFUNCS Member Support advisor (optional)** *[see note 11]*

………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………

**Please append supporting documents as required.**

Please return the completed and signed application form to the Secretary of the BAFUNCS Benevolent Fund: Joanna Tempowski, email: tempowskij@me.com; address: 31 Twining Avenue, Twickenham, TW2 5LL.