



# HKIE BENEVOLENT FUND APPLICATION FORM

The HKIE Benevolent Fund  
9/F Island Beverley, 1 Great George Street,  
Causeway Bay, Hong Kong  
tel: +852 2865 4446 fax: +852 2577 7791  
email: hkie-sec@hkie.org.hk www.hkie.org.hk

Full Name		Date of birth (dd/mm/yyyy)	
Are you a current/ past * member of HKIE <input type="checkbox"/> Yes		Membership no	
Are you an immediate family member of a current/ past * member of HKIE <input type="checkbox"/> Yes, I am			
(relationship) of		(full name of the current/ past HKIE member)	
Amount of support requested			
Correspondence address			
Home tel no		Mobile tel/pager no	Fax no
<i>* delete whichever is inappropriate</i>			

Give full particulars of circumstances necessitating this application, especially the reason why public assistance is not adequate and if owing to illness/ disability, attach physician's statement.

---

---

---

---

---

---

---

---

Have you made a previous application for assistance from this Benevolent Fund? If so, please state the particulars; and if applicable, reasons why the application was declined.

---

---

---

---

---

---

---

---

Have you applied for or received assistance from any other organisation/ institution? If so, please state the particulars; and if applicable, reasons why applications were declined.

---

---

---

---

---

---

---

---

Please give details of your employment history.

Currently employed  Yes Occupation: \_\_\_\_\_  
 No Date of retirement/ termination of last employment \*: \_\_\_\_\_

Name and address of current (last) employer \_\_\_\_\_  
 \_\_\_\_\_

Mode of current (last) employment  Full-time  Part-time  Temporary  Contract

Current (last) monthly salary HKD \_\_\_\_\_ (x \_\_\_\_\_ months)

*\* delete whichever is inappropriate*

Please give details of dependents (if any).

Name	Age	Relationship	Employed?		Married?		Provide financial support?		
			Yes	No	Yes	No	Yes	Amount per month	No
_____	_____	_____	<input type="checkbox"/>	HKD _____	<input type="checkbox"/>				
_____	_____	_____	<input type="checkbox"/>	HKD _____	<input type="checkbox"/>				
_____	_____	_____	<input type="checkbox"/>	HKD _____	<input type="checkbox"/>				
_____	_____	_____	<input type="checkbox"/>	HKD _____	<input type="checkbox"/>				
_____	_____	_____	<input type="checkbox"/>	HKD _____	<input type="checkbox"/>				

**HOUSEHOLD MONTHLY INCOME** (for last 12 months)

	HKD
Employment income	_____
Business profit if self employed	_____
Investment income (e.g. dividends, interest income, rental income)	_____
Allowances from government (e.g. assistance and relief from Social Welfare Department)	_____
Other income (e.g. pensions, contribution from relatives, grants from other charities funds)	_____
(use a separate sheet if necessary)	_____
<b>Total</b>	_____

**HOUSEHOLD MONTHLY EXPENDITURE** (for last 12 months)

	HKD
Rent for housing	_____
Mortgage for self-owned property (including house, car park, vehicles, etc.) (please specify)	_____
Tax payment (please specify the type of tax)	_____
Rates, water, utilities, telephone charges, etc.	_____
General housekeeping expenses	_____
Other expenses (e.g. insurance expenses, tuition fee for children, medical expenses)	_____
(use a separate sheet if necessary)	_____
<b>Total</b>	_____

**HOUSEHOLD ASSETS**

HKD

Estimated market value of self-owned property/ land/ car park/ vehicle

Estimated market value of securities and investments

Estimated net asset value of business undertaking

Other assets (e.g. bank balance, life insurance cash value, medical insurance coverage)

(use a separate sheet if necessary)

**Total****HOUSEHOLD LIABILITIES**

HKD

Outstanding mortgage, loans and credit card debts, overdraft (please specify)

Other liabilities (please specify)

(use a separate sheet if necessary)

**Total**

Do you anticipate any major changes in household income and expenditure set out in the above section in the next 12 months? If yes, please explain.

Please provide any other information you consider helpful in support of your application.

(use a separate sheet if necessary)

Please indicate a reference who could be contacted to provide details about your present circumstances. (Optional)

Name Relationship to applicant

Address

Occupation

**Declaration and undertaking**

I, the undersigned, declare that to the best of my knowledge and belief, the information given in the above sections is true and complete. I am aware that Trustees of the HKIE Benevolent Fund will rely on the information to determine the eligibility and to assess the level of financial assistance to be offered under the Fund and I undertake to report immediately to Trustees of the Fund any changes in the particulars contained herein. I further authorise the Trustees of the Fund to make any enquiries deemed necessary in connection with my application and authorise any person, organisation, company or institution to furnish the Trustees of the HKIE Benevolent Fund with any information relating to my particulars in its possession of my application. I also give my consent for the Trustees of the HKIE Benevolent Fund to disclose information provided by me to other parties who may be contacted in the course of enquiries.

Signature of applicant

Date

## **THE HKIE BENEVOLENT FUND**

The Benevolent Fund was set up in 2014 to provide financial assistance to The Hong Kong Institution of Engineers (HKIE) members, past members and their immediate families who are poor and/or have temporarily fallen upon hard times. The income of the Fund is from voluntary donations received from HKIE members. The Fund is registered as a charity under Section 88 of the Inland Revenue Ordinance and governed by the Trustees appointed by the Council.

### **Trustees**

Ir Francis S Y BONG (Chairman at meetings of the Trustees)

Ir James Y C KWAN

Ir Peter Y WONG

### **Responsibilities of trustees**

The trustees review applications for the Fund against the criteria under strict confidence. The trustees are also responsible to prepare financial statements which give a true and fair view. In preparing financial statements which give a true and fair view it is fundamental that appropriate accounting policies are selected and applied consistently.

### **Guidelines for application**

- The applicant must be a HKIE member, past member or his/her immediate family. Each application is judged solely on its own merit.
- Application must be made in writing on the HKIE designated application form and to be accompanied by a declaration listing out the financial situation including details of all assets and liabilities, income and expenditure in the family, with the amount of support requested. An explanation of why public assistance is not adequate is also required. Application form is obtainable via the HKIE website or through the Secretariat via email at [benevolent@hkie.org.hk](mailto:benevolent@hkie.org.hk).
- Where necessary, the applicant may be asked to attend an interview.
- The Fund can be provided in the following ways:

#### *By Grant*

No repayment is required

Applicable to those applicants where repayment cannot be reasonably expected in the foreseeable future or otherwise.

#### *By Interest Free Loan*

Repayment is required, by lump sum or installments

Applicable to those applicants who are experiencing temporary financial difficulties.

- The Trustees will determine the final amount, payment and repayment terms of an application.

### **HKIE Secretariat**

Mrs Monica YUEN, Chief Executive and Secretary of the HKIE