



DUPONT PARK SEVENTH-DAY ADVENTIST CHURCH

Dupont Park Church Application for Assistance

Please answer all questions and return the form in a sealed envelope to the church office to the attention of Benevolence Fund Committee

1. Name _____
2. Ages of children at home if any _____
3. Address _____
4. City, State and Zip Code _____
5. Telephone: (Home) _____ (Cell) _____
6. How long have you lived at present address? _____
7. Home - own / renting _____ Monthly mortgage / rent _____
8. If renting, give name, address, and telephone number of landlord

9. Salary _____ Monthly / Bi-weekly / Weekly
10. Average monthly utilities _____
11. Dupont Park Church Member: Yes _____ No _____
12. Detailed reason for request

13. Have you requested assistance from Dupont Park Church before? _____
A. If yes, give the approximate date with the last 12 months _____

14. Are you receiving Public assistance, Workers compensation or Unemployment? Yes _____
No _____

15. How will your next payment be met? _____

16. Is this an emergency request? _____ Yes _____ No

17. Amount owed for emergency \$ _____ Amount requested for emergency \$ _____

18. If yes, please attach all documentation to support emergency request.

- Eviction notice
- Pending utility cut off notice
- Medical Bills

19. Categories of request: check all that apply

- Rent / Mortgage
- Utilities
- Medical / Prescriptions
- Funeral
- Other (specify)

We are sensitive to your need and therefore your request shall be reviewed by the Deacon Committee as soon as possible. Please be sure the telephone number listed is a working number. By signing this application, you are authorizing the church or its representatives to make an inquiry if deemed necessary.

Signature: _____

Date: _____