



NEW LIFE

BIBLE FELLOWSHIP

Request for Financial Assistance - Benevolence Fund

Our Benevolence Fund assists those who are unable to meet their basic needs due to some form of crisis. Basic needs generally include food, clothing, shelter and medical attention. New Life's policy is not to give cash. When we are able to give assistance, it is provided in the form of a check made directly to a creditor. This request form contains personal, but pertinent questions that are kept confidential. Our Benevolence Team will process the form within seven days and will contact you directly with our decision. Please be very detailed in your answers.

Date: _____

Name: _____ Age: _____

Address: _____

Phone: _____ Email: _____

Circle One: Married Separated Divorced Single Parent Widow Single

Spouse's Name: _____

Name, Sex & Age of Children Living with You: _____

Information

If referred to us, by whom _____

Phone: _____

Transportation used (make/model/year of vehicle) _____

Employment Information (Circle One):

Full Time Part Time None Disabled Laid Off (Date _____)

Health Insurance: Yes No

Circle if covered by: Medicare Medicaid

Need and Financial Assessment

Describe the help you are requesting and the circumstances that created your need (please list specific dollar amounts):

Have you received assistance from another agency for this need? Yes No

If yes, what agency: _____

How has New Life helped you in the past? When and how much?

Have you taken steps to increase your income? Yes No

If yes, then list the steps: _____

Can you take steps to assure your expenses are less than your income? Yes No

If yes, please explain: _____

Amount of rent or mortgage payment? _____

Type of rental assistance you receive: _____

Do you rent using Section 8 housing? Yes No

Do you own your own home through a type of government assistance program?

Yes No

Assistance received from family or any other source? _____

How long have you lived in Pima County? _____

Where did you live previously? _____

Spiritual and Program Resources

You have come to a church to seek help. We hope to assist you with your immediate needs and help you through spiritual encouragement. We will determine if financial assistance is appropriate on a case-by-case basis and also according to our available resources.

Do you attend New Life? Yes No

If yes, which service? How often? _____

Do you attend church elsewhere? Yes No

If yes, Church Name and City: _____

Describe your relationship with Jesus:

If directed by our Elders, Pastors or Staff would you be willing to work with a financial counselor or coach? Yes No

By signing this form, I am verifying that all the information I have provided is true and correct. Furthermore, you have my permission to call, verify, or ask questions about any of the information that I have provided.

If married, both spouses should sign.

Signature: _____

Spouse's Signature: _____

Date: _____

Complete this form to the best of your ability as thoroughly and accurately as possible.

INCOME PER MONTH	
Job Salary	
Salary #1	<input type="text"/>
Salary #2	<input type="text"/>
Social Security	<input type="text"/>
Disability	<input type="text"/>
Other Income	
Alimony	<input type="text"/>
Child Support	<input type="text"/>
Interest/Dividends	<input type="text"/>
Total Income	<input type="text"/>

ASSETS	
Checking Balance	<input type="text"/>
Savings Balance	<input type="text"/>
Stocks	<input type="text"/>
Inheritance	<input type="text"/>
House Value	<input type="text"/>
Car(s) Value	<input type="text"/>
Other	<input type="text"/>
Total Assets	<input type="text"/>

EXPENSES PER MONTH	
Monthly Expenses	
Mortgage/Rent	<input type="text"/>
Gas	<input type="text"/>
Electric	<input type="text"/>
Water	<input type="text"/>
Garbage	<input type="text"/>
Cable/Internet	<input type="text"/>
Car Insurance	<input type="text"/>
Gas for Car	<input type="text"/>
Food	<input type="text"/>
Clothing	<input type="text"/>
Cell Phone	<input type="text"/>
Tithing	<input type="text"/>
Credit Card #1	<input type="text"/>
Credit Card #2	<input type="text"/>
Car Loan #1	<input type="text"/>
Car Loan #2	<input type="text"/>
School Loan	<input type="text"/>
Other	<input type="text"/>
Total Expenses	<input type="text"/>

DEBT	
Credit Cards	<input type="text"/>
Car Loans	<input type="text"/>
School Loans	<input type="text"/>
Home Mortgage	<input type="text"/>
Personal Loans	<input type="text"/>
Other Debt	<input type="text"/>
Total Debt	<input type="text"/>