



## Benevolence Request Form

1. We are living in a complex and needy world where need for financial assistance is becoming more and more prevalent. Stallion Springs Community Church (SSCC) annually sets aside a portion of its giving for benevolence assistance and that assistance will be shared in the following manner: members and regular attendees of SSCC will be given first priority and then outside assistance may be given on a case by case basis. Benevolence assistance is for one-time emergencies, and normally will only be given once every 12 months, with the total amount of assistance not exceeding \$300.
2. We are charged with being good stewards (managers) of God’s money given to us through the faithful support of the members and attenders of SSCC, and part of that involves the support of those in need of emergency assistance. We are also concerned about your spiritual needs as well as your physical needs. We will not participate in supporting a lifestyle or decision process that is not biblical.
3. Everyone’s financial situation changes from time to time, and we are asking that should your financial picture change, and you are able to reimburse SSCC for the amount of assistance provided, that you consider doing so in order for us to continue to help other families in need. You can reimburse us in one full payment, or make monthly payments should your situation change. Thank you.
4. All benevolence checks will be made payable to the debtor in cases of bills (ie. Landlord, electric company, gas or propane company, insurance company, etc.) and only in extremely rare circumstances to the recipient of the financial assistance. Copies of bills to be paid must accompany the request. In case of food requests, we have a food pantry, in which we can provide non-perishable food items.
5. Please fill out each question completely. **Forms will be returned for lack of information.** The application will not be processed without these questions completed in full. *Answer each question carefully, honestly and as informatively as possible.*

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Previous Address(es): \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Please list all persons in your household (names, ages): \_\_\_\_\_

Are you married? \_\_\_\_\_ How long? \_\_\_\_\_ Do you rent or own your home? \_\_\_\_\_

Are you currently employed? yes no Employer: \_\_\_\_\_ Phone: \_\_\_\_\_

If no, explain \_\_\_\_\_

Is your spouse employed? yes no Employer: \_\_\_\_\_ Phone: \_\_\_\_\_

Previous Employers:

1. Name: \_\_\_\_\_ Dates: \_\_\_\_\_ Why left? \_\_\_\_\_

2. Name: \_\_\_\_\_ Dates: \_\_\_\_\_ Why left? \_\_\_\_\_

3. Name: \_\_\_\_\_ Dates: \_\_\_\_\_ Why left? \_\_\_\_\_

Are you a member of Stallion Springs Church? yes no Regular Attender? yes no

If not, do you attend another Church? yes no If yes, which one? \_\_\_\_\_

How did you hear about our Church? \_\_\_\_\_

Please give a brief description of your need (owe money for rent, utilities, medical bills, etc.) and the circumstances which brought you to this need: \_\_\_\_\_

How much assistance are you seeking? \_\_\_\_\_ What is the time frame of your need? \_\_\_\_\_

What is the name and contact information for the debtor? (*landlord, utility company, etc.*)

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Account #: \_\_\_\_\_

Have you received assistance from another source for this need, or previous need? yes no

List those sources: \_\_\_\_\_

Sources and amount of income/aid:

Employment \_\_\_\_\_ Unemployment \_\_\_\_\_

Welfare \_\_\_\_\_ Salvation Army \_\_\_\_\_

Food Stamps \_\_\_\_\_ Ministries/Churches \_\_\_\_\_

Individuals \_\_\_\_\_ Social Security/Disability \_\_\_\_\_

Other \_\_\_\_\_ **Total income per week/month \$** \_\_\_\_\_

What are your living expense needs?

Food per week/month \$ \_\_\_\_\_ Utilities \$ \_\_\_\_\_

Rent/Mortgage \$ \_\_\_\_\_ Transportation \$ \_\_\_\_\_

Other \$ \_\_\_\_\_ **Total expenses per week/month \$** \_\_\_\_\_

Do you have a car or access to transportation? yes no

The above information is true to the best of my knowledge. The church has my permission to check with any of the above sources to use them to determine assistance. I understand that the church receives many requests and is not able to give financial help to everyone who requests it, and is not bound to assist me.

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

Office Use Only:

Reviewed by: \_\_\_\_\_ Date: \_\_\_\_\_

Action taken: \_\_\_\_\_

Check #: \_\_\_\_\_ Payable to: \_\_\_\_\_ Amount: \$ \_\_\_\_\_