



## **BENEVOLENCE FUND GUIDELINES:**

### **PURPOSE:**

The Benevolence Fund provides financial aid to an individual or family who are in need on an urgent basis. This fund may not be applicable for cases which need long-term financial support. The church has the right to adjust or decline an applicant's request and may consider providing assistance other than monetary help.

Applicants are not granted financial assistance based on relationships between church leaders or being a significant church contributor. The church does not discriminate between applicants based upon race, religion, color, gender, sexual orientation, national origin, age, geographic territory, or disability.

### **PARAMETERS:**

- All requests for funds will only be based upon the merit of the application submitted by the applicant.
- These funds are meant to meet short term needs. Therefore, long term and/or repetitive expenses will NOT be considered.
- Financial assistance will NEVER be paid directly to any individual. All assistance will require the submission of a third party (landlord, utility provider, etc.) prior to the church issuing a check for payment.
- Assistance is NOT limited to just financial, other forms of goods or services might be deemed as better solutions. The type of aid given depends on the applicant's need and the available resources.
- A MAXIMUM of \$250 is available for assistance toward approved applications.
- If the applicant's specific need is greater than \$250:
  - A) In some cases that meet specified requirements, amounts greater than \$250 may be approved by the Calvary Bible Church Leadership.
  - B) The applicant MUST provide proof that the difference between the requested for amount and the \$250 monetary assistance will be met by the applicant or another resource.

### **PROCESS:**

- Completed applications will be reviewed by the Calvary Bible Church Leadership. The leadership will provide a final decision within 7-10 business days of receipt of the applicant's form.
- The applicant will be contacted by a member of the Church Leadership with the final decision or a request for additional information. Please allow for the 7-10 business days window to expire before inquiring about the status of an application.
- At the discretion of the Church Leadership, documentation regarding income, personal bank statements, and expenses may be requested. The Church Leadership may also request to speak directly to the landlord, utilities provider, etc.
- If approved, a check will be distributed to the landlord, utilities provider, etc. for which the applicant owes funds.
- All applications will be held on file for 5 years.



## BENEVOLENCE FUND APPLICATION:

### PERSONAL INFORMATION:

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

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

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

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

Do you regularly attend church? \_\_\_\_\_ Pastor's name? \_\_\_\_\_

Church's Name? \_\_\_\_\_

How many people live in your home? \_\_\_\_\_

Their relationship to you? \_\_\_\_\_  
\_\_\_\_\_

How many children do you have? \_\_\_\_\_

How old is each child? \_\_\_\_\_  
\_\_\_\_\_

### PROFESSIONAL INFORMATION:

Where are you currently employed? \_\_\_\_\_

How long have you been there? \_\_\_\_\_ Is it a full or part-time position? \_\_\_\_\_

Is anyone else in your home employed? \_\_\_\_\_

Where are they currently employed? \_\_\_\_\_

How long have they been there? \_\_\_\_\_ Is it a full or part-time position? \_\_\_\_\_

If you are not working, how have you been looking for work and what obstacles hinder you from taking a job? \_\_\_\_\_  
\_\_\_\_\_

**PRESENT SITUATION (CIRCUMSTANCE INFORMATION):**

What is the nature of your current need? \_\_\_\_\_  
\_\_\_\_\_

Where else have you sought assistance? \_\_\_\_\_

If we are unable to help you, what other options do you have? \_\_\_\_\_  
\_\_\_\_\_

How do you feel that you may be partially responsible for the event(s) which have occurred recently that have prompted your need for assistance? \_\_\_\_\_  
\_\_\_\_\_

What specific steps can you take to improve your current situation? \_\_\_\_\_  
\_\_\_\_\_

**PLUS (ADDITIONAL INFORMATION):**

How else might we be able to come alongside you? \_\_\_\_\_  
\_\_\_\_\_

Is there any other information which you feel would be helpful for us to be aware of as we consider this application?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Applicant's Signature: \_\_\_\_\_

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

(Office Use Only):

Approved By: \_\_\_\_\_

Date Approved: \_\_\_\_\_

Resolution Agreed Upon: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_