## **Benevolence Request Form**

Name:		Date:	<del></del>
Address:	Email:		
1. Are you a member of any Church? Yes	No		
2. If Yes, which Church?_			
3. Which best describes your attendance at Life Church?			
Frequent Sometimes Seldom Never			
4. In your opinion, which description best describes your financial situation?			
Short term emergency Short term problem Long term problem			
5. What is the total amount of your request?			
6. What is the purpose of the request?			
7. Who should the check be made out to?			
8. Are you willing to participate in financial counseling? Yes No			
9. Are you currently employed? Yes No Full Time (FT) Part Time (PT)			
Name of Employer:			
10. If married, is your spouse currently employed? Yes No FT PT			
Name of Employer:			
11. Total number of people in your Household:			
12. Total Household income: Weekly: Monthly:			
13. Briefly, explain your needs and what led you to request assistance:			
- <del></del>			
Signature:			
Official Use Only			
Approved via Email Approved at Meetin	g Need	d more information	n Denied
More information needed	· · · · · · · · · · · · · · · · · · ·		
Committee Review date Approved ar	nount	_ Check #	Funding Date
Venmo, CashApp or Address funds mailed to or person given to:			

Attribution: FreeChurchForms.com <a href="https://www.freechurchforms.com/church-benevolence.html">https://www.freechurchforms.com/church-benevolence.html</a>