

Date _____

Financial Assistance Questionnaire

White River Christian Church
1685 N. 10th Street
Noblesville, IN 46060
(317) 773-2233

Attn: Applicant:

White River Christian Church is currently focusing our resources on the areas indicated below. However, we are looking for information on other areas of need God may lead us to in the future. If you don't currently fall into one of the areas of focus, please complete the questionnaire so we can identify future areas of need.

Personal Information:

Last Name: _____ First: _____ Maiden: _____

Street Address: _____ Apt.#: _____

City: _____ State: _____ Zip: _____

Phone Home: _____ Work: _____ Ext. _____ Mobile: _____

Date of Birth: _____ Age: _____ SS#: _____

Check One: Male Female

Marital Status: Single Engaged Married Separated Divorced Widowed

Spouse Information (if applicable):

Last Name: _____ First: _____ Maiden: _____

Street Address: _____ Apt.#: _____

City: _____ State: _____ Zip: _____

Phone Home: _____ Work: _____ Ext. _____ Mobile: _____

Date of Birth: _____ Age: _____ SS#: _____

Please read each question and check box(es) that apply:

1. Do you regularly attend White River Christian Church? Yes No
2. Do you regularly receive groceries from our Food Pantry? Yes No
3. Please indicate if you live in one of the following neighborhoods?
 - Riverwood
 - Suburban Estates
 - Southwest Quadrant of Noblesville (south of SR 32 / Conner and west of 10th Street/Allisonville Rd.)

IF YOU DID NOT ANSWER YES OR FALL INTO ONE OF THE THREE RESIDENTIAL CATEGORIES LISTED ABOVE, PLEASE DISCONTINUE AND CONTACT GOOD SAMARITIAN AT (317) 842-2603.

Office Use Only
Date received:
Date scanned:
Date notified:

Financial Assistance Guidelines

A. Procedure to follow per request:

1. To request financial assistance you MUST complete this basic information form. You MUST also attach a copy of the original bill(s) for which you are requesting assistance.
2. The White River Financial Mentoring Team will be contacting you to set up an appointment.
3. If approved, you will need to come to the church office (between 8:30 am – 4:30 pm) to pick up the check. You will also need to make arrangements for its delivery.
4. **The following requests will be considered:**

Basic utilities: Gas, Electric, Water, Rent, and Mortgage Payment

We are unable to assist with the following: Phone of any kind, Cable, Internet, Credit Card debt, Gasoline, Legal Fees, Tuitions, nor Disconnect Fees.

B. Housing:

Own Purchasing Renting Other / Explain _____

How long have you been at your present address? _____

Landlord or Mortgage Company _____

Address _____

City _____ State _____ Zip _____

- Previous address _____

How long were you there? _____ Why did you leave? _____

Landlord's name and address: _____

- Previous address _____

How long were you there? _____ Why did you leave? _____

Landlord's name and address: _____

C. Vehicles:

Do you have access to a car? Yes No

Make: _____ Model: _____ Year: _____

Make: _____ Model: _____ Year: _____

D. List all debts and outstanding bills:

Amount	For	Need by Date

What events led to your needing assistance? _____

Have you received assistance from us in the past? Yes No

When / How much / For what? _____

E. List All Other Individuals Sharing Your Household *(Use backside if needing additional space.)*

Full Legal Name	Age	Date of Birth	Relationship	Monthly Income

F. Applicant Employment History – list last three employers

If you are unemployed, are you currently seeking employment? Yes No

How long have you been unemployed? _____ Reason: _____

What steps are you taking to seek active employment? _____

1. Present / Most Recent Employer: _____

Supervisor's name: _____ Phone: _____

Street Address: _____

City _____ State _____ Zip _____

Employment Dates: _____ to _____ Monthly income: _____

Position and Job Description: _____

Reason for leaving _____

2. Present / Most Recent Employer: _____

Supervisor's name: _____ Phone: _____

Street Address : _____

City _____ State _____ Zip _____

Employment Dates: _____ to _____ Monthly income: _____

Position and Job Description: _____

Reason for leaving: _____

3. Present / Most Recent Employer: _____

Supervisor's name: _____ Phone: _____

Street Address: _____

City _____ State _____ Zip _____

Employment Dates: _____ to _____ Monthly income: _____

Position and Job Description: _____

Reason for leaving: _____

4. Any additional employment please list here: _____

G. Spouse's Employment History – list last three employers

If spouse is unemployed, are they currently seeking employment? Yes No

How long have they been unemployed? _____ Reason: _____

What steps are they taking to seek active employment? _____

1. Present / Most Recent Employer: _____

Supervisor's name: _____ Phone: _____

Street Address: _____

City _____ State _____ Zip _____

Employment Dates: _____ to _____ Monthly income: _____

Position and Job Description: _____

Reason for leaving : _____

2. Present / Most Recent Employer: _____

Supervisor's name: _____ Phone: _____

Street Address: _____

City _____ State _____ Zip _____

Employment Dates: _____ to _____ Monthly income: _____

Position and Job Description: _____

Reason for leaving: _____

3. Present / Most Recent Employer: _____

Supervisor's name: _____ Phone: _____

Street Address: _____

City _____ State _____ Zip _____

Employment Dates: _____ to _____ Monthly income: _____

Position and Job Description: _____

Reason for leaving: _____

4. Any additional employment please list here: _____

H. Personal / Character References:

Please list the names of three references and their phone numbers (other than relatives):

- 1. _____
- 2. _____
- 3. _____

Do they know about your needs? Yes No

I. Additional Information:

Have you seen a financial counselor within the last six months? Yes No

If so, whom? _____

Have you contacted anyone else for assistance within the last six months? Yes No

Please specify: Family Friends Churches Agencies

What steps are you taking to improve your present situation?

What is the name and phone number of your church? _____

_____ Pastor's name? _____

Are you a member? Yes No Since: _____ Do you attend regularly? Yes No

How frequently? _____

Who suggested you contact White River Christian Church? _____

Their relationship to you? _____ Phone: _____ (day) _____ (night)

Have you received assistance from us in the past? Yes No

When / How much / For? _____

How would you describe your current relationship with Jesus Christ? _____

Are you disabled? Yes No If yes, explain: _____

Any physical / emotional issues that hinder you from meeting your financial needs? Yes No

Explain: _____

Are you willing to participate in a self-help program? Yes No

WRCC Financial Assistance Procedures / Authorization:

- Complete entire financial form and submit to WRCC office.
- Form will be submitted and given to WRCC’s financial assistance mentoring team for review (please allow two weeks for review and verification).
- If your application is approved, you will be notified by a WRCC mentoring coordinator for a consultation session to review your current situation and to guide you through developing a budget to help understand how to overcome your financial situation.
- Although one consultation is requested, our team would be glad to meet with you and any of your family members to provide accountability/guidance towards financial independence.
- If financial assistance is approved, maximum level granted may be up to \$300 per 12-month period / per household.
- WRCC also offers two financial courses: Crown Financial Ministries (www.crown.org) a 10-week study and Financial Peace University (www.daveramsey.com) a 13-week course.

I, the undersigned, have read the above procedures and authorize White River Christian Church (WRCC) to verify all information provided, and I give WRCC permission to contact my present / former employers and all references.

Printed name: _____

Signature: _____

Date: _____

Office Use Only:			
Request approved: <input type="checkbox"/> Yes <input type="checkbox"/> No			
Reason denied: _____			

Authorized payments:			
For:	Amount	Check #	Date