

FINANCIAL ASSISTANCE APPLICATION



Setting The Captives Free. Giving God The Glory.

PERSONAL INFORMATION

FIRST NAME: _____ LAST NAME: _____

MIDDLE NAME: _____

MOST RECENT ADDRESS: _____ CITY: _____

STATE: _____ ZIP: _____

HOME PHONE: _____ CELL PHONE: _____ OTHER

PHONE: _____

DO YOU OWN YOUR OWN CELL PHONE? _____ CELL BRAND/MODEL: _____

CARRIER: _____

MONTHLY CELL PHONE BILL: \$ _____

DO YOU OWN A COMPUTER? _____

DO YOU OWN A CAR? _____ YEAR/MAKE/MODEL: _____

DO YOU HAVE THE TITLE? _____

PLEASE PRAY AND ASK THE LORD TO BRING TO YOUR MIND ANY ASSETS THAT COULD BE PAWNED OR SOLD IN ORDER TO MEET YOUR FINANCIAL OBLIGATION TO THE COMPASSION CONNECTION. LIST BELOW ANY AND ALL VALUABLES YOU OWN. (FOR EXAMPLE: MOTORCYCLES, GAMES, SPORTING EQUIPMENT, JEWELRY, SAVINGS ACCOUNTS, CHECKING ACCOUNTS, RETIREMENT ACCOUNTS, COINS, ELECTRONICS, FURNITURE, GOLD, ETC)

FAMILY INFORMATION

LIST CLOSEST FAMILY MEMBERS OR FRIENDS:

NAME	RELATIONSHIP TO YOU	ADDRESS/PHONE
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_____	_____	_____
_____	_____	_____
_____	_____	_____

EMPLOYER INFORMATION

PLEASE LIST YOUR 3 MOST RECENT EMPLOYERS.

#1

DATES EMPLOYED: _____ POSITION/TITLE: _____

COMPANY NAME ADDRESS/CITY/STATE/ZIP SUPERVISOR PHONE #

#2

DATES EMPLOYED: _____ POSITION/TITLE: _____

COMPANY NAME ADDRESS/CITY/STATE/ZIP SUPERVISOR PHONE #

#3

DATES EMPLOYED: _____ POSITION/TITLE: _____

COMPANY NAME ADDRESS/CITY/STATE/ZIP SUPERVISOR PHONE #

ARE YOU ELIGIBLE FOR UNEMPLOYMENT BENEFITS? _____

ARE YOU WILLING TO APPLY FOR UNEMPLOYMENT BENEFITS? _____

LIST ALL PROGRAMS THAT YOU QUALIFY FOR: (FOOD STAMPS, DISABILITY BENEFITS, FUEL ASSISTANCE, SSI, ETC)

IF YOU ARE NOT PRESENTLY RECEIVING THESE BENEFITS, ARE YOU WILLING TO APPLY FOR BENEFITS THROUGH THE COUNTY OR STATE? _____

SKILLS DETERMINATION

WHAT SKILLS DO YOU POSSESS THAT WILL HELP YOU BECOME EMPLOYABLE IN THE FUTURE?

ARE YOU WILLING TO COMPLETE A PROFILE TO HELP DETERMINE YOUR AREAS OF GIFTEDNESS?

THE COMPASSION CONNECTION OFFERS YOU THE OPPORTUNITY TO REDUCE SOME OF YOUR DEBT BY PARTICIPATING IN "WORK DETAIL". THE JOBS WILL VARY. ARE YOU WILLING TO WORK DILIGENTLY AND FAITHFULLY AS UNTO THE LORD? _____

WAGES EARNED THROUGH "WORK DETAIL" WILL BE PAID AS A DONATION TO THE COMPASSION CONNECTION.

FINANCIAL INFORMATION

PLEASE ATTACH A COPY OF YOUR MOST RECENT TAX RETURN.

SAVING ACCOUNT BALANCE: \$ _____ CHECKING ACCOUNT BALANCE: \$ _____

OTHER: (IRA, CD'S, PENSION) \$ _____

AGREEMENT

1. I PROMISE, ALL THE INFORMATION PROVIDED IN THIS APPLICATION IS COMPLETE AND TRUE.
2. I PROMISE, I WILL DILIGENTLY SUPPORT THE EFFORTS OF THE COMPASSION CONNECTION (FINANCIALLY AND OTHERWISE) EVEN AFTER I GRADUATE FROM THE PROGRAM.
3. I WILL COOPERATE WITH THE COMPASSION CONNECTION STAFF IN COMPOSING AND DISTRIBUTING LETTERS TO MY FAMILY AND FRIENDS REQUESTING THAT THEY PRAYERFULLY CONSIDER SUPPORTING THE COMPASSION CONNECTION MINISTRY.
4. BY SUBMITTING THIS APPLICATION, YOU AUTHORIZE THE COMPASSION CONNECTION TO MAKE INQUIRIES INTO THE BANKING, BUSINESS AND FAMILY INFORMATION YOU HAVE PROVIDED.

SIGNATURE:

DATE:
