



REAL CHURCH

Benevolence Request Form

APPLICANT INFORMATION

Name: _____ Date: _____

Address: _____

Email: _____

Are you a member of REAL Church? _____ Yes _____ No

If no, are you a member of any church? _____

Which best describes your attendance at Church?

_____ Frequent _____ Sometimes _____ Seldom _____ Never

In your opinion, which description best describes your financial situation?

_____ Short-term emergency _____ Short-term problem _____ Long-term problem

Have you requested assistance from REAL Church in the past? _____

If so, when: _____ If assistance was given, how much: _____

Are you currently employed? _____ Yes _____ No _____ Full Time (FT) _____ Part Time (PT)

Name of Employer: _____

How long have you been employed by this company: _____

If married, is your spouse currently employed? _____ Yes _____ No _____ (FT) _____ (PT)

Name of Employer: _____

Total number of people in your Household: _____

Total Household Income: Weekly: _____ Monthly: _____



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Household Monthly Expenses: (Total) \$_____

Rent/Mortgage	
Utilities	
Food	
Medical	
Car (Insurance/Payments)	
Internet/Cable	
Loans	

What is the purpose of the request?

What is the total amount of your request? \$_____

Briefly, explain your needs and what led you to request assistance:



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Are you willing to participate in financial counseling? _____ Yes _____ No

Signature: _____ Date: _____

OFFICIAL USE ONLY

_____ Approved via Email _____ Approved at Meeting _____ Need more information _____ Denied

More information needed:

Committee Review Date: _____ Approved Amount: _____ Funding Date: _____

Payment Made to: _____ Acct # _____

Additional Payment Information: