

Attention: Please read this entire page before filling out the application. If you do not provide what is needed, we cannot help you.

- WCC **CANNOT GIVE ANY IMMEDIATE HELP**. Allow up to 3-4 weeks for processing and please understand that we cannot guarantee anything.
- Any bill submitted must be due in the current month.
- WE **CANNOT ACCEPT ORIGINAL BILLS** – YOU must provide copies.

WCC will only make a copy of your DL.

- **WE WILL NOT PROCESS AN INCOMPLETE APPLICATION**. Please check to be sure you have completed every page.

It is your responsibility to provide proper documentation. We will not consider anything that is not listed as a “Need.” The amount listed must match exactly the amount on the bill. Do not estimate or round off the amount.

YOU MUST ATTACH OFFICIAL, CURRENT statements or bills GIVING THE EXACT AMOUNT DUE and the NAME AND ADDRESS OF THE PAYEE for every item listed as a need.

Please be sure that any online account printouts also have the amount due and the name and address of the payee clearly printed on them. Otherwise, we will not consider them.

You will be notified of the next step if your application is complete.

Weare Christian Church
10 Concord Stage Road
Weare, NH 03281
603-529-7729

Elder's Fund Assistance Request Form

Name(s) _____

Address _____

City/State _____

Home and Cell Phone number: _____

Age(s) _____ Single ___ Married ___ Divorced ___ Separated ___ Widowed

Name and Location Home of church: _____ Are

you a member of above church? If so, for how long? _____ If you

have no home church or are not a member, briefly explain why.

Current or Most Recent Employer Information (List for both you and spouse):

Name of Company or business: _____

Phone: _____ Contact person: _____

Name of Company or business: _____

Phone: _____ Contact person: _____

If currently unemployed, check here: You ___ Spouse ___

Children's names & ages of only those who are currently living with you on a daily basis.

If you have adult Children, please provide contact information in space above.

Exactly what kind of help are you asking for?

(Continued)

Briefly explain the circumstances which brought about this need.

Where else have you gone for financial assistance in the last year? How much support did each one give?

Are you or your spouses parents still living? If so Provide contact information:

List what type of financial aid you may be receiving from a government agency:

Unemployment Insurance Social Security Worker's Compensation
 Disability Other

Are you willing to confidentially meet with the Elders who may ask other and personal financial questions? Yes No

Would you be willing to work with a financial budget counselor? Yes No

I give my permission to have the appropriate church personnel validate any of the above information.

Signature _____ Print Name _____

Date _____

All of the above information as well as any information gathered from a budget counselor or the Elder Board will remain confidential except for those in the decision making process. Please return to the Weare Christian Church office 10 Concord Stage Road Weare, NH with proper ID.