



BENEVOLENCE FUND REQUEST

*To serve you in the most effective way possible, we ask that you complete this form **before** we disburse any financial assistance.*

Name: _____

Current address(es): _____

Phone number: _____ Email: _____

Emergency contact **and** relationship to you: _____

Best time and way to reach you: _____

1. Please tell us a about yourself and situation (explain your assistance need and timeline): _____

2. Who have you already asked for help? Check all that apply.

Spouse or children: _____

Other family member. Their relationship to you: _____

State/governmental organization(s): _____

Other church(es): _____

3. How much assistance did each give, and when did they last provide it? _____

4. Please also describe your spiritual journey, if any, with the churches you listed above. _____

5. Are you: working? Where, and what is your current income? _____

collecting unemployment or disability

collecting other income (please specify) _____

6. What other resources are you in great need of?

Connection to local resources – housing assistance, financial counseling, etc. _____

Transportation (if so, please indicate to and from where) _____

Food

Temporary shelter: how long, and for how many people? _____

Other: _____

7. How did you hear about Parkwood? _____

8. How much assistance have you received from Parkwood before? _____

If your request for funds is approved, we will contact you according to the information you gave us above and endeavor to follow up with you for spiritual care. We invite you to join us in worship on Sunday mornings at 10:30 a.m., as well as any of our small groups. Thank you for visiting, and feel free to leave any **prayer requests** here for us to lift up for you: _____
