	Social Concern	ns Application		
Application Date:	Type of a	assistance needed:		
Name of Applicant:	Is	s the bill in your name?		
Social Security #:	Phone Nu	imber:		
Mailing Address:				
Physical Address:				
Email Address:				
Are You a Member of a church?	If yes, what c	hurch:		
Pastor's Name:	Have you a	sked your church for h	elp?:	
Have you asked other churches for	help?			
Which Churches:				
<ul> <li>What agencies have you asked for (Circle One)</li> <li>Have you ever been helped by Springer If yes, when?</li> <li>Who referred you to Springfield One</li> </ul>	ingfield Oaks Churc _ What did we help	ch? o you with?		Other?
Who referred you to Springfield Or List all persons who live in your ho				
Name	Relationship	Age		
1				
2				
3				
4				
5				
6				
Do you receive WIC for your child		chcare for Kids?:		
Amount of Money requesting:				

*Springfield Oaks Church* 210 Cleveland Street • Springfield, GA 31329 • (912) 754-6646 • (912) 754-1344 For rent assistance, please list the name and address of landlord where a check can be sent:

What EMERGENCY caused you to be unable to pay this bill?

Name & Place of Employment:
Monthly Income Earned:
If unemployed, are you looking for a job?
Do you receive unemployment? Amount?:

## OTHER Sources of Income Received (please list amount)

- 1. Social Security:\_\_\_\_\_
- 2. VA Benefits:\_\_\_\_\_
- 3. Child Support:\_\_\_\_\_
- 4. Food Stamps:\_\_\_\_\_
- 5. Retirement:\_\_\_\_\_

## List all of your monthly expenses

- Rent or mortgage:\_\_\_\_\_
- Gas for home:\_\_\_\_\_
- Electricity:\_\_\_\_\_
- Water/Sewage:\_\_\_\_\_
- Phone:\_\_\_\_\_
- Vehicle Payments:\_\_\_\_\_
- Insurance:\_\_\_\_\_

Other(specify):\_\_\_\_\_

I understand that Springfield Oaks Church is not a government agency and receives no government funds. Any available assistance is the result of donations made by the congregation of Springfield Oaks Church. I agree that the information I have listed on this application is true to the best of my knowledge. I hereby grant the Social Concerns Committee of Springfield Oaks Church the authority to access and obtain any information on my current or past due account (electric or water).

Applicants Signature: \_\_\_\_\_