

SPENCER CHRISTIAN CHURCH

Benevolence Application Packet

(This top page is to be kept by those seeking assistance)

Offering a Hand Up, Rather Than a Hand Out

Offering A Hand Up is an integral part of the mission of Spencer Christian Church as we minister to those in need, both spiritually and financially. It is our desire to assist people in unfortunate circumstances without creating greater dependencies. In every situation, we strive to treat each person with dignity and respect.

Spencer Christian Church provides assistance with Mortgage, Rent, Utility Payments, Medical Expenses, Home/Car Repairs, Special Needs Assistance, Financial Counseling.

Benevolence Guidelines

You must be a resident of Spencer County (or an active member of Spencer Christian Church) Potential applicants can pick up a benevolence application at the church (5720 Taylorsville Rd) Monday through Thursday between 9AM – 4PM. Assistance is limited to once every twelve months.

Frequently Asked Questions

1. **What is the purpose of Benevolence?**

Our purpose is to minister to those in need; both spiritually and financially by offering a "hand up" rather than a "hand out."

2. **What types of assistance do you offer?**

We offer help with rent, utility payments, medical expenses, auto repairs, and special needs. (We do not pay rent to individuals.)

3. **How does the process work?**

The applicant completes a "Benevolence Application" (all questions must be answered). Forms are available at the church. A SCC Benevolence team meets bi-weekly to review the applications. Applications cannot be considered if it is not filled out completely. If the applicant qualifies, they may be scheduled for an interview with 2-3 members of the Benevolence team to discuss their need. The Benevolence team will make a decision and contact the applicant. In some situations additional steps may be required.

4. **How often does the Benevolence team meet?**

The Committee meets on the 1st and 3rd Wednesday of each month.

5. **Is the application and interview process confidential?**

Yes.

6. **Will money be given directly to me?**

No. All monies will be paid directly to the utility company, landlord, etc.

7. **How will I know if I am eligible to meet with the Benevolence Committee?**

You will receive a call detailing the time, place and items to bring if selected.

8. **How long does it take to get assistance?**

Usually within 2-3 days following the benevolence team meeting. (1st & 3rd Wednesdays)

Spencer Christian Church Benevolence Assistance Request

Office Use Only	
Date Rcvd	_____
CMEM	_____
Accepted	_____
Amount	_____

Date ____/____/____

PERSONAL INFORMATION

Name (Last): _____ (First): _____ (Maiden): _____

Address: _____ Apt.# _____ City: _____ State: _____ ZIP: _____

Phone(Daytime): _____ (Work): _____ (Evening): _____

Date of Birth ____/____/____ Age: _____

Marital Status: Single Engaged Married Separated Divorced Widowed

INFORMATION ON SPOUSE

Name (Last): _____ (First): _____ (Maiden): _____

Address: _____ Apt.# _____ City: _____ State: _____ ZIP: _____

Phone (Daytime): _____ (Work): _____ (Evening): _____

Date of Birth ____/____/____ Age: _____

Marital Status: Single Engaged Married Separated Divorced Widowed

LIST YOUR SPECIFIC REQUEST

Amount	For (include company, account numbers, etc.)	Due Date

If utility assistance is requested attach a copy of your utility bill

What events led to your needing assistance? _____

List All Individuals Sharing Your Household

Name	Age	Date of Birth	Relationship	Monthly Income
1.				
2.				
3.				
4.				
5.				
6.				
7.				

Applicant Employment History

Present/Most Recent Employer _____ Phone _____
 Supervisor _____ Phone _____
 Address _____
 City _____ State _____ ZIP _____
 Employment Dates _____ to _____
 Position and Job Description _____
 Reason for leaving _____

If you are unemployed, are you currently seeking employment? Yes No

How long have you been unemployed? _____

Reason: _____

What steps are you taking to seek active employment? _____

Spouse's Employment History

Present/Most Recent Employer _____ Phone _____
 Supervisor _____ Phone _____
 Address _____
 City _____ State _____ ZIP _____
 Employment Dates _____ to _____
 Position and Job Description _____
 Reason for leaving _____

Housing

Own/Purchasing Renting How long have you been at your present address? _____

Landlord/Mortgage Company _____

Address _____

City _____ State _____ ZIP _____

Previous address, landlord's name, and phone number: _____

How long were you there and why did you move? _____

Do you have access to a car? Yes No

Monthly Income

Job #1 (take home pay)	\$ _____
Job #2	\$ _____
Spouse's Job #1	\$ _____
Spouse's Job #2	\$ _____
Child Support	\$ _____
Retirement	\$ _____
Social Security	\$ _____
SSI/Disability	\$ _____
Food Stamps	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
TOTAL Income	\$ _____

Monthly Expenses

Balance You Owe

Tithes/Contributions	\$ _____	
Rent	\$ _____	
Mortgage	\$ _____	_____
Car payment(s)	\$ _____	_____
Auto Insurance	\$ _____	
Auto (gas & oil)	\$ _____	
Electric/Gas	\$ _____	
Water	\$ _____	
Food	\$ _____	
Home Phone	\$ _____	
Cell Phone	\$ _____	
Cable/Satellite	\$ _____	
House & Hygiene Supplies	\$ _____	
School Supplies	\$ _____	_____
Medical	\$ _____	
Day Care	\$ _____	
Child Support	\$ _____	_____
Credit Cards	\$ _____	_____
School Loans	\$ _____	_____
Bank/Finance Loans	\$ _____	_____
Other	\$ _____	_____
TOTAL Expenses	\$ _____	_____

Additional Information

Have you seen a financial counselor within the last six months? Yes No

If so, with whom? _____

Have you contacted anyone else for assistance within the last six months? Please specify:

Family Friends Churches Agencies

What steps are you taking to improve your present situation? _____

What is the name and phone number of your church? _____

Are you a member? Yes No Minister's name: _____

Do you attend regularly? Yes No How often? _____

How would you describe your current relationship with Jesus Christ? _____

Who suggested you contact Spencer Christian? _____ Phone _____

Have you received assistance from us in the past? Yes No

When/what? _____

Have you received assistance from other organizations in the past Yes No

Who/when _____

Are you willing to participate in a self-help program? Yes No

Do you have physical or emotional issues that hinder you from meeting your financial needs?

Yes No Explain: _____

References' names and phone numbers (other than relatives): **MUST BE COMPLETED**

1. _____

2. _____

3. _____

I authorize Spencer Christian Church to verify all information provided including contacting references and other community partners.

Signature _____ Date _____

Printed name _____