



Grant Request Form

GENERAL INFORMATION

Name: _____ Location: _____

Date of Hire: _____ Dept: _____ Title: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Phone: (h) _____ (c) _____ (w) _____

Pay Rate: _____ Full / Part Time: _____

Marital Status: Single: _____ Married: _____ Divorced: _____ Widowed: _____

Total # Living in household: _____ Children: _____ Spouse: _____ Other: _____

Children: Ages: _____

Spouse/Domestic Partner Employment Status: FT/PT: _____ Rate of Pay: _____

Please describe the event or events that have led to your financial crisis: (attach additional page if necessary)

What is your specific request? What efforts have you made to address this crisis?

FINANCIAL INFORMATION

INCOME:

Checking/Savings Accounts: \$_____/total

Monthly Income: Current Take Home Pay \$_____/month
 Spouse/Partner Current Take Home Pay \$_____/month
 Food Stamps \$_____/month
 Social Security \$_____/month
 SSI \$_____/month
 Investment Income \$_____/month
 Disability Income \$_____/month
 Unemployment Income \$_____/month
 ALL Other sources of Income \$_____/month (family, church, friends, etc.)

Are you on Medicare? Y / N \$_____/mo Medicaid? Y / N \$_____/mo Have health insurance? Y / N

TOTAL INCOME: \$_____/mo

EXPENSES:

Please list the average monthly amount for each item below

Home: *Own _____ Rent _____

Housing Payment \$_____/mo \$_____ outstanding* \$_____ Est. value*

Phone: \$_____/mo

Car Ins. \$_____/mo

Gas/Electric: \$_____/mo

Property Ins. \$_____/mo

Water: \$_____/mo

Property Tax \$_____/mo

Cable: \$_____/mo

Health Ins.* \$_____/mo

Car Payments: \$_____/mo

***List only if not paid through B&T**

Life/Disability Ins.* \$_____/mo

Fuel: \$_____/mo

***List only if not paid through B&T**

Childcare: \$_____/mo

Credit Cards \$_____/mo _____ outstanding

Food: \$_____/mo

Other Debt (cc, etc.): \$_____/mo _____ outstanding

Personal Living Exp. \$_____/mo

Other: _____

TOTAL EXPENSES: \$_____/mo

Providing additional documentation (receipts, estimates, invoices, etc.) to support the value of your request will help to expedite the response. Please list any other information we would need to consider your request.
