



## FINANCIAL ASSISTANCE APPLICATION

YOUR NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

To help us be good stewards of the financial resources of Meadowbrook Church, we ask you to complete both pages of the following questionnaire. For this request to be considered, it must be completed in its entirety and a copy of your bill attached. The Financial Assistance Team will give your application thoughtful and prayerful consideration. You will receive a phone call from a member of our team to review the information. If your application is approved, financial help is only made payable directly to the vendor.

### Financial Assistance Instructions

If you are going through a financial hardship and are actively engaged in Meadowbrook Church, we will prayerfully consider coming alongside you. If your application is approved, we will help you in several ways:

- Financial coaching to help you gain skills to manage your finances and gain understanding of Biblical principles around stewardship and spending.
- Help creating a budget.
- Financial assistance for rent, mortgage or utilities.

Return the completed application to [meadowbrookcares@mbcocala.org](mailto:meadowbrookcares@mbcocala.org). **Please don't turn in your application without all the necessary attachments listed below:**

- ☐ The front & back of your current driver's license or I.D.
- ☐ Full copy of your lease or mortgage statement, if applicable.
- ☐ If requesting assistance with your lease/mortgage, our Accounting Department will request a W9 from your lender/mortgage company. If we are unable to get a W9, we will not be able to continue the process of the application.
- ☐ If requesting assistance with electric, water or gas utilities, we need a copy of your current bill.

### Assistance Requested

If your application is approved, checks can only be issued to the vendor.

Vendor Name (to whom payment is due)	Vendor Phone	Amount
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
Total amount of need		\$ _____
How much can you, family, or friends pay towards this need?		\$ _____
Total assistance you are requesting from Meadowbrook Church?		\$ _____

I have applied for unemployment:      Yes      No

I am actively applying for a job:      Yes      No

I have recently applied for these jobs:

1.) \_\_\_\_\_ Date applied: \_\_\_\_\_

2.) \_\_\_\_\_ Date applied: \_\_\_\_\_

3.) \_\_\_\_\_ Date applied: \_\_\_\_\_

What has happened to create this hardship?      Unemployment      Injury      Death      Hospitalization      Illness      Other

Briefly explain your hardship:

In what way do you see God moving in your life:

Briefly describe your relationship with MBC: Are you connected with an MBC pastor, staff member or church attender?

If approved, please give us several options between 10am-3pm M-Th of good dates & times where we can schedule you for financial assistance coaching.

1.)	2.)	3.)
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## Personal Information – Please Print

Name _____	Date _____
Date of Birth _____	Phone _____
Address _____	Work Phone _____
City _____	E-mail Address _____
State _____	Spouse's Name _____
Zip Code _____	# in Household _____
Marital Status    Married    Separated    Single    Living Together    Divorced    Widowed	
Employed _____	Yes    No    How long employed? _____
Spouse Employed _____	Yes    No    How long employed? _____
Part-time or Full-time? _____	

## Income and Expenses

Monthly Income		Monthly Expenses			
		Column A		Column B	
Job-Take home	\$ _____	Tithe	\$ _____	Credit Cards	\$ _____
Spouse's Job	\$ _____	Rent/Mortgage	\$ _____	Phone	\$ _____
Social Security	\$ _____	Electric	\$ _____	Insurance	\$ _____
SSI Disability	\$ _____	Food	\$ _____	Clothing	\$ _____
Child Support	\$ _____	Cable/TV	\$ _____	Repairs	\$ _____
Food Stamps	\$ _____	Vehicle	\$ _____	School	\$ _____
Retirement	\$ _____	Gas	\$ _____	Pet Cost	\$ _____
Other	\$ _____	Other	\$ _____	Other	\$ _____
<b>Total Income</b>	<b>\$ _____</b>	<b>Total Expenses (Add Columns A&amp;B)</b>		<b>\$ _____</b>	

Have you received financial assistance from other ministries and/or government agencies in the last year?      Yes      No  
 If yes, please complete the information below.

Date	Amount	Reason
_____	_____	_____
_____	_____	_____

By my signature below, I am authorizing Meadowbrook Church to check any of the sources I have provided on this sheet.

X \_\_\_\_\_  
**Applicant's Signature**

X \_\_\_\_\_  
**Date**

**REQUEST FOR RELEASE OF INFORMATION**  
**Meadowbrook Church**  
**4741 SW 20<sup>th</sup> Street, Ocala, FL 34474**  
**352.873.3767**  
[www.mbcocala.org](http://www.mbcocala.org)

Lendor/Mortgage Company	
Address	
Phone Number	
Tenant Account Number	
Tenant Printed Name	
Tenant Phone Number	
Tenant Address	
Tenant last 4 Digits of SS#	
Tenant Birthdate	
Reason for Request	<input checked="" type="checkbox"/> Requesting a W-9 for Meadowbrook Church 501 (c)(3) for tax purposes <input checked="" type="checkbox"/> Mortgage information to assist in making a payment <input checked="" type="checkbox"/> Other
Purpose of Release	I hereby authorize Meadowbrook Church, in their role as a benevolence agency, to make a one-time payment to said Lender/Mortgage Company on my behalf.

X \_\_\_\_\_  
 Tenant Signature

\_\_\_\_\_  
 Date

**\*\*Please email W-9 to meadowbrookaccounting@mbcocala.org**

**FOR OFFICE USE ONLY**  
**FINANCIAL ASSISTANCE INTAKE WORKSHEET**

Intake by:	Date:
Name of applicant:	Spouse's name:
Applicants Cell phone:	Applicants Email:
Applicants Address:	City/State/Zip:

Other income not included?	Veteran?
Social Security/Survivor's Benefits?	
How often attending MBC?	Online/In-person
Do you tithe/give?	Growth Track?
Small Group?	Where Dream Team?

**PASTORAL TEAM NOTES:**

Application approved by:	Date:
Application declined by:	Date:
Reason declined:	

**AMOUNTS APPROVED FOR ACCOUNTING DEPARTMENT PROCESSING:**

Vendor:	\$
Vendor:	\$
Vendor:	\$

In CCB:	Added to CCB: <input type="checkbox"/> Scanned
<b>Prior Assistance</b> Rent      Date: _____ Utilities      Date: _____ Gift Card      Date: _____	