

FRANKLIN COVENANT CHURCH
BENEVOLENCE FUND COVER SHEET
Non-Member Request

To those applying for aid from Franklin Covenant Benevolence fund:

Please completely fill out the attached information form. Once completed, this form will be given to the benevolence fund administrator who will evaluate it and check the information. Then a review will be made by our benevolence committee and a decision on whether or not we can help at this time will be made. The benevolence administrator will communicate back with you based on these decisions.

Please be aware that we pray over every request and do our best to hear what the Lord says to us about that request.

We do not commit to help financially with every request that we receive. Approval is based on a number of factors, including the availability of funds. However, we do commit to pray over every family represented and invite you to join us at our worship or small group meetings.

Sunday Worship

8:30 a.m. Early Celebration

9:40 a.m. Adult Bible Study

10:30 a.m. Fellowship Continental Breakfast served

11:00 a.m. Celebration II

Small groups meet during the week at varying times and places. Please visit our website for more information:
www.FranklinCovenantChurch.org

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Name: _____ Date: _____

Address: _____

Employer: _____

Phone Number: _____ Cell Number: _____

How long at the above address? _____

Is this temporary or permanent address? _____ Yes _____ No

Who currently lives with you? (names and ages) _____

Previous Address: _____

Who suggested you contact us?

What is the financial need? _____

What are the circumstances that led to this need? _____

If approved, who should the check be written to and for how much? Note, that FCC's policy is not to write a check to the individual requesting the funds. (landlord, Duke Energy, Ingles, etc.) _____

Have you received any kind of financial assistance from any other agency, ministry, or church in the last year? If so, please provide the name, phone number and specific help. _____

Have you contacted Social Services? _____ Yes _____ No

Have contacted CareNet? _____ Yes _____ No

Do you have a church home? _____ Yes _____ No

If so, name, phone number, and address of home church. _____

Does your home church know of your need? _____ Yes _____ No

Have they helped you? _____ Yes _____ No

Why or why not? _____

Do you have a police record? _____ Yes _____ No

What is your payment with local utility companies?

Always on time _____ Sometimes late _____ Usually late _____

Do you give the police department, utility companies, and/or local churches/ministries to verify that the information in the application is correct? _____ Yes _____ No

Signature: _____ Date _____

Office use only:

Church member who received this form: _____

Benevolence Fund use:

Check Written: _____ Yes _____ No

To: _____

Date written: _____ Amount: _____

Check endorsed by: _____

Notes: