

CHRISTMAS CHEER APPLICATION FORM

**Please Note:** Eligible applicants will receive a food hamper to assist with Christmas. We are also hopeful that we will receive sufficient donations to be able to provide gift cards to help purchase toys/gifts for your children.

**PLEASE SUBMIT YOUR APPLICATION FORM AS SOON AS POSSIBLE**

**Deadline Date for Applications: November 18, 2022**

**PRINT CLEARLY**

|  |  |
| --- | --- |
| APPLICANT’S NAME: |  |
| TELEPHONE: |  |
| **You must provide a phone number that you may be contacted at. This can be your own phone, or the number of a family member, friend or neighbour who can get in contact with you.** |
| PHYSICAL ADDRESS: |  |
| E-MAIL: |  |

**List all CHILDREN living at your address:**

|  |  |  |  |
| --- | --- | --- | --- |
| NAME | RELATIONSHIP TO YOU | BOY/GIRL | AGE |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**Financial**

**APPLICANT income per month from all sources:**

|  |  |
| --- | --- |
| MONTHLY INCOME | MONTHLY EXPENSES **(personal loans not included in expenses)** |
| Employment | $ | Rent | $  |
| Child Tax Benefit | $ | Hydro | $ |
| Assistance (i.e. Ont. Works) | $  | Telephone/Cell | $  |
| Pension (i.e. Disability, CPP)  | $ | Cable | $ |
| Child Support | $ | Groceries | $ |
| Other | $ | Heat | $ |
|  | $ | Transportation (fuel, taxi) | $ |
| **TOTAL** | $  | **TOTAL** | $  |

**(Applications with incomplete Income and Expenses will NOT be considered)**

|  |  |  |  |
| --- | --- | --- | --- |
| Name | Relationship to You | List place of Employment or Source of Financial Assistance | Total Income from all sources |
|  |  |  | $  |
|  |  |  | $ |
|  |  |  | $  |
|  |  |  | $ |
| **TOTAL** | **$** |

**List all ADULTS living at your address:**

|  |  |
| --- | --- |
|  | **Include totals from applicable chart above.** |
| **APPLICANT** | $ |
| **ADULTS** living at your address | $ |
| **COMBINED TOTAL** | $ |

**Total Combined Income:**

I certify that the information provided on this application is true and correct. I also understand that my application will be reviewed by the Christmas Cheer Selection Committee to determine eligibility. The Committee is comprised of staff of the Community Support Centre-NW and community volunteers.

APPLICANT SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Completed applications may be: Faxed to: 807-223-8370

 Emailed to: cheer@drytel.net

 Mailed to: Community Support Centre-NW

 53 Arthur Street

 Dryden, ON P8N 1J7

 or dropped off in the *Cheer Drop Box* at the above address

Eligible applicants will be notified by phone or email. Pick-up information will be provided at that time. Incomplete applications will NOT be considered.