

**Benevolence Fund Application Form**

 *For I know the plans I have for you, declares the Lord, plans to prosper you and not to harm you, plans to give you hope and a future. (Jeremiah 29:11)*

Thank you allowing the church the opportunity to serve you during this time of financial need. Our priority is to help those members in our congregation who have exhausted all other options for aid and who are in urgent financial crisis.

Name       Date

Address:

Phone Number:

Email:

Are you currently employed? If so, where?

Please Explain Your Situation as well as other means of support you have exhausted:

What Need Do You Have (check all that apply)

[ ] Food

[ ] Rent

[ ] Mortgage Payments

[ ] Utilities

[ ] Medical Emergencies

[ ] Travel

[ ] Other (please explain)

Amount Requested with Explanation $     . If you are requesting a check to a third party vendor, please provide that information below as well.

Vendor Name

Vendor Address

Vendor Note

Are you a member of Great Commission Community Church (GCCC)? [ ] yes [ ] no

Are you a regular attender (3-4xs/month) of GCCC [ ] yes [ ] no

Do you regularly give or tithe to GCCC? [ ] yes [ ] no

How long have you attended GCCC?