

Cedar Mill Bible Church

Benevolence Request Guidelines

The purpose of the Benevolence Fund is to provide financial aid to those with urgent needs. The Benevolence Fund is not applicable for long-term financial support. The church has the right to adjust or decline an applicant's request and provide assistance that is not monetary.

Financial assistance is not based on relationships with church leaders or being a significant church contributor. The church does not discriminate against applicants based upon race, religion, color, gender, sexual orientation, national origin, age, or disability.

Benevolence Fund Parameters

- Benevolence funds are granted on the merit of the application and are intended to meet basic short-term needs. These are defined as those necessary for physical, emotional, and spiritual survival resulting from circumstances beyond a person's control. These needs are as follows:
 - Food
 - Housing (rent, utilities)
 - Clothing
 - Medical Assistance (including counseling)
 - Please note, this is only granted on a case by case basis
- Benevolence funds cannot be granted for the following:
 - Automotive expenses (including car payments, deposits, repairs, etc.)
 - Legal fees (including lawyer fees, bail, court fees, traffic violations, etc.)
 - Long term and/or recurring expenses
- Benevolence funds will only be granted to anyone in an immediate family one time during a 12-month period.
- A maximum of \$250.00 will be made available toward approved applications.
 - (In cases that meet the specific requirements, some exceptions may be made).

Benevolence Fund Process

- Completed forms will be reviewed by the Cedar Mill Bible Church Benevolence Fund committee. The team will provide a final decision within 7-10 business days of receipt of the applicant's form.
- The applicant will be contacted by a member of the committee with the final decision or a request for additional information. Please allow 7-10 business days before inquiring about the status of an application.
- Documentation regarding income and expenses may be requested by the committee. The committee may also request to speak directly to the vendor/business/service provider/landlord.
- If approved, a check will be distributed directly to the vendor/business/service provider/landlord to which the applicant owes funds.

Other Resources available

Community Action Opening Doors-Portland (503) 517-3198

Community Action-Beaverton (503) 615-0772

Community Action Family Shelter-Hillsboro (503) 640-3263

Call 211-housing, utilities, crisis & emergency, food, health

Application for Assistance

Benevolent Fund

Cedar Mill Bible Church – (503) 644-3156

Picture identification is **ABSOLUTELY** required to apply for assistance. Please allow the Receptionist to make a copy of your photo ID and submit it along with this form. Filling out this Application for Assistance is not a guarantee you will receive assistance. Cedar Mill Bible Church has limited resources that may or may not be available at the time you apply.

Name: _____

Address: _____

City: _____ State: _____ Zip code: _____

Phone(s): _____

Gender: _____ Date of Birth: _____ Age: _____

Marital Status: _____ Are you disabled? _____

Children's names & Ages: _____

Are you a member of Cedar Mill Bible Church? Yes No

How did you hear about Cedar Mill Bible Church? _____

Have you attended a service here before? Yes No How many times? _____

Have you ever been active in a church? Yes No

If so, name of church: _____

What churches have you contacted for help? _____

What steps have you taken to obtain financial assistance from non-church sources? _____

Are you receiving any government aid? Yes No

If so, please describe: _____

Have you received assistance from us in the past? Yes No

Are you currently employed?

Yes No

What events lead to your needing assistance?

What are your specific needs? (Please list in order of importance):

Amount of request?

If any of these are recurring financial obligations, how will you meet them in the future?

Please list all sources of income and all current expenses

Income

Expenses

1)

1)

2)

2)

3)

3)

4)

5)

6)

7)

By signing below I attest that I fully understand the information being requested in this application and I have provided accurate and honest responses to the best of my knowledge. The committee assures all personal information will be kept confidential.

Signed:

Date:
