United Christmas Service Application

- ✓ Please fill out this application if you are interested in being referred to the United Christmas Service for holiday assistance. This form <u>MUST</u> be returned to the school by November 16, 2012.
- ✓ Only 1 application per family will be accepted.
- ✓ Please complete all information requested. Information is to be listed only for those family members residing in the home. All personal information will be kept confidential and will only be used to complete the referral process with the United Christmas Service, donor groups, and/or community service groups.
- ✓ Depending on family need and resources available, families may be assisted through a donor program (where the family is "adopted" for Christmas), a direct assistance program (family receives a restricted voucher for food, clothing, and/or toys), or a community service group program (assistance provided according to service group guidelines).
- ✓ There is no guarantee that you will receive assistance.

Phone Number:

✓ If you have any questions, please call Mr. Scott Stroud, school social worker, at 326-3121. <u>ALL PAPERWORK MUST BE RETURNED TO MR. STROUD BY NOVEMBER 16, 2012.</u>

I authorize Greenfield-Central Schools to release my family information as listed on this application to the United Christmas Service. I understand that if my family is selected by a donor group or community service organization, the information (with the exception of social security numbers) will also be released to a contact person from that group. Parent/Guardian Signature Date A. HEAD OF HOUSEHOLD/ADULT CONTACT PERSON Social Security Number First Name _____ Last Name_ # of People in Household_____ # of Children in Household_____ Date of Birth: _____ Gender: Male ____ Female____ Marital Status: Married ___ Single___ Domestic Partnership___ Widowed_____ Primary Language Spoken _____ Check if attending school: full time ___ part time___ Ethnicity: Caucasian ____ African American ____ Hispanic ____ Native American ____ Asian____ Other Address (Include Apartment Number) _____ _____ State ____ Zip Code_____ City

B. Reason for Family Need

You must check one sentence in each category

Food & Clothing—check only 1

- I can provide food and clothing for my family
- o I sometimes need help from assistance programs for food, clothing and household items
- o I regularly use assistance programs for food, clothing and household items

Income—check only 1

- I have a steady source of income and/or my job is not in jeopardy
- I sometimes need financial assistance
- o I have no steady income and regularly use public benefits (TANF, Food Stamps, Unemployment, etc)
- o I have no income and limited or no public benefits

Housing—check only 1

- I have stable and adequate housing
- Short term help is needed to remain in adequate housing
- o Overcrowded or substandard living conditions; I may be evicted soon
- o Homeless or Recent eviction or living in a shelter or living with family/friends due to financial need

Christmas assistance—check only 1

- o I will receive Christmas help from another program or family
- o I will receive limited Christmas help, but not equivalent to United Christmas Service
- o I may receive limited Christmas help through others, but unknown at this time
- o I will not receive Christmas help through any other means

Health—check all that apply

- I or someone in my family needs regular medical treatment. Please list family member and active medical condition
- o I or someone in the family has special needs or disability. Please list family member and need/disability
- I or someone in the family uses mental health services regularly

Transportation—check only 1

- I have limited transportation
- Household member homebound

Employment—check all that apply

- Employed full time
- Employed part time
- o Unemployed
- o Disabled
- Veteran
- Attend school full time
- Attend school part time

Other information that may demonstrate the need for assistance

Please check the appropriate line if you would like to be considered for a holiday food basket (if available	e).
You may be contacted by a community organization providing this service for	
further clarification regarding family need.	

Thanksgiving	Christmas	

C. WISH-LIST ITEMS

A list of 3-4 wish list items for each family member living in the home, <u>maximum of \$25 per item</u>, is requested. Requests for Wii, PlayStation, IPod, and other expensive items **are not** acceptable.

Requests for gift cards are acceptable for individuals 14 years old and older only, however other items MUST be listed as well.

Please be specific in your request - ex. Wal-Mart gift card for groceries, One Direction CD, Connect Four game, pink pajamas, etc.

Specific items listed make it easier for donor groups to complete their shopping.

HEAD OF HOUSEHOLD WIS unior's, big and tall, etc):	SH LIST (if listing clothing or shoes, please be specific about size…m	nisses, men'
)		
2)		<u> </u>
3)		
4)		
D. HOUSEHOLD MEMBER INF	FORMATION	
Circle One:	ousehold/Adult Contact Person Child Aunt/Uncle Cousin Grandchild Grandparent Niece Relation	:/Nephew
·	per	
First Name	Last Name	
Date of Birth	Gender: Male Female	
Marital Status: Married	Single Check if in School	
Ethnicity: Caucasian Afri Other	ican American Hispanic Native American	Asian
Person #1 Wish List (if listing clothin	ng or shoes, please be specific about sizemisses, men's, jr's, toddlers	s, etc):
)		
2)		<u> </u>
3)		
1)		

2. Relationship to Head of Household/Adult Contact Person

Circle One:

4)

Spouse Child Parent Foster Child Aunt/Uncle Cousin Grandchild Grandparent Niece/Nephew Significant Other Sibling No Relation Person #2 Social Security Number_____ First Name ____ Last Name____ Date of Birth: _____ Gender: Male___ Female___ Marital Status: Married Single Check if in School Caucasian ____ African American ____ Hispanic ____ Native American ____ Asian ____ Ethnicity: Other____ Person #2 Wish List (if listing clothing or shoes, please be specific about size...misses, men's, jr's, toddlers, etc): 1) 2) 3) 4) **3.** Relationship to Head of Household/Adult Contact Person Circle One: Spouse Child Parent Foster Child Aunt/Uncle Cousin Grandchild Grandparent Niece/Nephew Significant Other Sibling No Relation Person #3 Social Security Number First Name Last Name Date of Birth:_____ Gender: Male___ Female___ Marital Status: Married Single Check if in School Ethnicity: Caucasian ____ African American ____ Hispanic ____ Native American ____ Asian___ Other____ Person #3 Wish List (if listing clothing or shoes, please be specific about size...misses, men's, ir's, toddlers, etc): 1)

4. Relationship to Head of I Circle One:	Household/Adult Con	tact Person		
Spouse Child Parent Foste Significant Other Sibling N		Cousin Grandchild	Grandparent	Niece/Nephew
Person #4 Social Security Nur	nber			
First Name	Last Na	ame		
Date of Birth:	Gender:	Male Female_		
Marital Status: Married	Single	Check if in School		
Ethnicity: Caucasian A	frican American	_ Hispanic	Native American	Asian
Person #4 Wish List (if listing cloth	ing or shoes, please be	specific about sizemis	sses, men's, jr's, to	oddlers, etc):
1)				
2)				
3)				
4)				
5. Relationship to Head of It Circle One: Spouse Child Parent Foster Significant Other Sibling It Person #5 Social Security Number 1	er Child Aunt/Uncle No Relation	Cousin Grandchild	·	·
Date of Birth:	Gender	: Male Female_		
Marital Status: Married	Single	Check if ir	School	
Ethnicity: Caucasian Other	African American _	Hispanic	Native Americ	can Asian
Person #5 Wish List (if listing cloth	ing or shoes, please be	specific about sizemis	sses, men's, jr's, to	oddlers, etc):
1)				
2)				

3)

4)

6.	Relationship to Head of Household/Adult Contact Person
----	--

Circle One:

4)

Spouse Child Parent Foster Child At Significant Other Sibling No Relation	unt/Uncle Cousin Grandchild Grandparent Niece/Nephew
Person #6 Social Security Number	
First Name	Last Name
Date of Birth:	Gender: Male Female
Marital Status: Married Single	Check if in School
Ethnicity: Caucasian African A Other	merican Hispanic Native American Asian
Person #6 Wish List (if listing clothing or shoe	s, please be specific about sizemisses, men's, jr's, toddlers, etc):
1)	
2)	
3)	
4)	
Significant Other Sibling No Relation	unt/Uncle Cousin Grandchild Grandparent Niece/Nephew
Person #7 Social Security Number	
First Name	Last Name
Date of Birth:	Gender: Male Female
Marital Status: Married Single	Check if in School
Ethnicity: Caucasian African A Other	merican Hispanic Native American Asian
Person #7 Wish List (if listing clothing or shoes	s, please be specific about sizemisses, men's, jr's, toddlers, etc):
1)	
2)	
3)	

Relationship to Head of Household/Adult Contact Person Circle One: Spouse Child Parent Foster Child Aunt/Uncle Cousin Grandchild Grandparent Niece/Nephew Significant Other Sibling No Relation
Person #8 Social Security Number
First Name Last Name
Date of Birth: Gender: Male Female
Marital Status: Married Single Check if in School
Ethnicity: Caucasian African American Hispanic Native American Asian Other
Person #8 Wish List (if listing clothing or shoes, please be specific about sizemisses, men's, jr's, toddlers, etc):
1)
2)
3)
4)
9. Relationship to Head of Household/Adult Contact Person Circle One: Spouse Child Parent Foster Child Aunt/Uncle Cousin Grandchild Grandparent Niece/Nephew Significant Other Sibling No Relation
Person #9 Social Security Number
First Name Last Name
Date of Birth: Gender: Male Female
Marital Status: Married Single Check if in School
Ethnicity: Caucasian African American Hispanic Native American Asian

Person #9 Wish List (if listing clothing or shoes, please be specific about size...misses, men's, jr's, toddlers, etc):

Other____

1)		
2)		
3)		
4)		

I have received my voucher check(s) in the total amount of \$	
TO BE COMPLETED ONLY IF/WHEN VOUCHER CHECKS ARE RECEIVED:	