Goodfellows Application for Assistance

Name of family in need	d				
Address					
Phone no Phone no		e no			
Head of household an	d total no. in househo	old (list all adults in house	ehold, provide first and	l last name)	
Head of household		Other Adu	Other Adult		
Other Adult		Other Adu	Other Adult		
Total no. of children in ho	ousehold				
Child Name		Age	_ School	Gender : MF	
Child Name		Age	School	Gender : MF	
Child Name		Age	School	Gender : M F	
Child Name		Age	_ School	Gender : M F	
Child Name		Age	_ School	Gender : M F	
Do you have primary	custody/guardian shi	p? _Yes	No		
Yearly income inform	<u>nation</u>				
Job Unem	ployment SS	SI FIA	Bridge Ca	ard	
Alimony Child su	apport Housing	Commission/Section	8 Support	_	
Rent o	r Mortgage				
Have you been helped	l by Goodfellows befo	re?YesNo I	f yes, when		
Are you being assisted	d by any other organi	zations?YesN	lo		

Please provide a copy of the following information: Driver's License Birth Certificate for each child Mortgage Statement or Rental Agreement Bridge Card Documents