

# Renaissance Hope Community Alliance

## Benevolence Assistance Request Form

### Applicant Information

|                |  |                  |  |
|----------------|--|------------------|--|
| Full Name:     |  | Address:         |  |
| Phone / Email: |  | Date of Request: |  |

### Type of Assistance Requested

Food   Housing   Utilities   Other (Specify): \_\_\_\_\_

### Description of Need

Briefly describe your situation and the reason for your request:

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Amount Requested: \$ \_\_\_\_\_

### Documentation

(Required: attach supporting materials such as bills, eviction notices, or utility statements.)

### Declaration

I affirm that the information provided is true and accurate. I understand that submission does not guarantee assistance and that all requests will be reviewed in accordance with the Benevolence Policy.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### For Internal Use Only

|                      |  |                            |  |
|----------------------|--|----------------------------|--|
| Received By / Date:  |  | Reviewed By / Date:        |  |
| Approved ■■ Denied ■ |  | Notes / Follow-Up Actions: |  |

Submit this completed form and required documentation to the Benevolence Team at  
RHCA.Benevolence@gmail.com