



# City of Wainwright

## Donation Request Household Hardship

*The City of Wainwright recognizes the needs of our community and has established a small fund to provide short term emergency assistance for Wainwright residents for household hardship. Because City funds are limited, the City must be the last resort for help – you must request assistance from other sources first. Qualification for this assistance is based on the guidelines set by the City Council to ensure that funds will be available when these urgent needs occur.*

### **Household Hardship Assistance - \$200 Maximum per Household:**

May cover any kind of emergency family hardship such as food, fuel, rent

- \$200 Maximum donation per fiscal year (July to June) **Amount of This Request:** \_\_\_\_\_
- \$200 Maximum donation per Household – your household includes everyone living in your home
- Employment – if you or any member of your immediate family (spouse, partner, etc) is employed, you do not qualify.
- Must first request assistance from other sources such as the Native Village of Wainwright, SNAP, NSB, etc and attach copy of notice of the approval or denial of this primary assistance.
- Must be a Wainwright resident – proof of residency and copy of ID must be provided

**Name** \_\_\_\_\_

**Physical Address** \_\_\_\_\_

**Mailing Address** \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Phone** \_\_\_\_\_ **Email** \_\_\_\_\_

**List People in Your Household** (include all children, family and other people living in your home):

\_\_\_\_\_  
\_\_\_\_\_

**Employment** List employment status for applicant, spouse/partner, other immediate family.

\_\_\_\_\_  
\_\_\_\_\_

**Other Financial Assistance Requested:** Attach copies of approval/denial notices from Native Village of Wainwright, NSB, SNAP (food stamps), etc. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Reason for Household Hardship Request:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Date:** \_\_\_\_\_

**Name** \_\_\_\_\_ **Signature** \_\_\_\_\_

**OFFICE USE ONLY:** Staff Received: \_\_\_\_\_ Council Approval: \_\_\_\_\_ Finance Review: \_\_\_\_\_

Approved \_\_\_\_\_ Amount: \_\_\_\_\_ Funding Source: \_\_\_\_\_