



# RYAN'S Ark

enriching the lives of those in need through  
acts of random kindness

This application will be used to determine eligibility to receive funding from RYAN'S Ark in order to help enrich the lives of those in need. Selections are limited to funding availability and will be determined fully at our discretion. Please provide as much information as possible. If your application is considered you may be asked to provide more information or documentation. Please PRINT and use legal name that will match government issued identification and provide a current mailing address & phone number. Once the application is complete please email it to [RyansArkInfo@gmail.com](mailto:RyansArkInfo@gmail.com).

## Application

### Referring Organization / Individual

Organization  
Full Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Organization  
Federal ID /  
EIN# \_\_\_\_\_  
Contact  
Full Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_  
*Street Address* *Floor/Suite #*

\_\_\_\_\_

*City* *State* *ZIP Code*

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

### Applicant Information

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_  
*Last* *First* *M.I.*

Address: \_\_\_\_\_  
*Street Address* *Apartment/Unit #*

\_\_\_\_\_

*City* *State* *ZIP Code*

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Amount  
Being  
Requested: \_\_\_\_\_



Reason for Applying: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Who will be the potential recipient(s) of your charitable request? (Check all that apply)

Me and / or my family     An individual / family in need

Other (please explain): \_\_\_\_\_

Are you a citizen of the United States?      YES    NO  
      

Have you ever been convicted of a felony?      YES    NO  
      

If yes, explain:

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

**References**

*Please list a reference.*

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

*Street Address* \_\_\_\_\_ *Apartment/Unit #* \_\_\_\_\_

*City* \_\_\_\_\_ *State* \_\_\_\_\_ *ZIP Code* \_\_\_\_\_

**Applicant - Previous or Current Employment**

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Supervisor Name: \_\_\_\_\_

Address: \_\_\_\_\_

*Street Address* \_\_\_\_\_ *Floor/Suite #* \_\_\_\_\_

*City* \_\_\_\_\_ *State* \_\_\_\_\_ *ZIP Code* \_\_\_\_\_

Job Title: \_\_\_\_\_ Combined Gross Monthly Income from All Sources: \$ \_\_\_\_\_ How many people are supported by this income? \_\_\_\_\_

May we contact your previous or current supervisor?      YES    NO  
      

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



## Disclaimer and Signature

*I certify that my answers are true and complete to the best of my knowledge.*

*If this application leads to funding through RYAN'S Ark, I understand that false or misleading information in my application or interview may result in legal action.*

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Person Applying on Behalf of Recipient: \_\_\_\_\_ Date: \_\_\_\_\_

## Media Release Form

**MEDIA/PHOTO WAIVER:** *Undersigned authorizes and gives full consent to Released Parties to copyright and/or publish for public view any and all photographs, digital recordings, videotapes and/or film in which Applicant appears. Undersigned agrees that Released Parties may transfer, use, or cause to be used, these digital recordings, photographs, videotapes, or films for any exhibitions, public displays, publications, commercials, art and advertising purposes, television programs, and internet without limitations or reservations.*

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

