

SOUTHGATE GOODFELLOWS

APPLICANTS

**PLEASE MAKE SURE THAT ALL APPLICANTS
HAVE THIS TOP SHEET WITH THEM**

THESE ARE THE TIMES FOR INTERVIEWS:

FRIDAY, NOVEMBER 28 9:00AM TO 3:00 PM

SATURDAY, NOVEMBER 29 9:00AM TO 3:00 PM

AT THE SOUTHGATE Library

**NO ONE WILL CALL!
YOU MUST SHOW UP**

**PLEASE RETURN APPLICATIONS TO THE
MAYOR'S OFFICE OR THE FIRE DEPT.**

YOU MUST ANSWER ALL QUESTIONS

2014

SOUTHGATE GOODFELLOWS APPLICATION

NAME _____

SPOUSE/OTHER _____

ADDRESS _____ PHONE# _____

ADDITIONAL PHONE# _____

VETERAN IN FAMILY INCLUDING PARENTS YES / NO

BOYFRIEND FIANCE MARRIED DIVORCED SINGLE SEPARATED OTHER

LIST ALL OTHERS LIVING IN HOUSE

NAME _____ AGE _____ IN SCHOOL OR WORKING YES NO

NAME _____ AGE _____ IN SCHOOL OR WORKING YES NO

TOTAL HOUSEHOLD INCOME _____

EMPLOYER (S) _____ AMOUNT _____ PER WK/MO/YR

_____ AMOUNT _____ PER WK/MO/YR

NO INCOME IS NOT ACCEPTABLE

ADDITIONAL INCOME: FOOD STAMPS \$ _____, FIA \$ _____, SSI \$ _____,

CHILD SUPPORT \$ _____, UNEMPLOYEMENT \$ _____, SS DISABILITY \$ _____,

SS DEATH BENEFIT \$ _____, NATIVE AMERICAN \$ _____ ALIMONY \$ _____,

OTHER \$ _____

IS ANY ONE HELPING YOU FINANCIALLY _____

DO YOU LIVE IN SOMEONE'S ELSE HOME _____

CAR - MAKE/MODEL _____ YEAR _____

HOUSE PAYMENT/RENT _____ UTILITIES _____ OTHER _____

REMARKS: _____

NAME _____ AGE _____ BOY/GIRL
DATE OF BIRTH _____

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DATE OF BIRTH _____

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DATE OF BIRTH _____

NAME _____ AGE _____ BOY/GIRL
DATE OF BIRTH _____

NAME _____ AGE _____ BOY/GIRL
DATE OF BIRTH _____

NAME _____ AGE _____ BOY/GIRL
DATE OF BIRTH _____

DIAPERS SIZE IF NEEDED _____

TOYS THAT YOUR CHILD WOULD LIKE _____

WHAT PREFERENCE DOLL WHITE BLACK HISPANIC _____

LIST FOOD ALLERGIES _____

WOULD YOU LIKE A HAM OR TURKEY _____

HAVE YOU BEEN HELPED BY THE GOODFELLOWS IN THE PAST 2 YEARS?

ARE YOU BEING HELPED FOR CHRISTMAS BY ANY OTHER ORGANIZATIONS?

I DECLARE THAT THE INFORMATION ON THIS APPLICATION IS TRUE & CORRECT.

IF IT IS FOUND TO BE INCORRECT YOU WILL BE DISQUALIFIED FOR ASSISTANCE FROM THE GOODFELLOWS.

APPLICANT'S SIGNATURE _____ DATE _____

Goodfellows Interview Rep. Signature _____ DATE _____

**PLEASE BRING THE FOLLOWING
ITEMS WITH YOU TO THE INTERVIEW**

ID

DRIVER'S LICENSE/STATE ID

**3 PIECES OF MAIL WITH YOUR NAME
& THE SOUTHGATE ADDRESS**

PROOF OF INCOME

**PAY STUBS, FIA PAPERS, CHILD SUPPORT,
SOCIAL SECURITY, SSI OR**

DISABILITY, ALIMONY,

CHILDREN'S BIRTH CERTIFICATE

CHILDREN'S REPORT CARDS

LAST YEAR'S TAXES (1040)