



Chanooka Wish

Questions email
Carolyn@Chanookawf.org
Charlene@Chanookawf.org

Family # _____ Date Rec: _____

Application for Assistance Thanksgiving & Christmas 2018

This form is to be completed by families seeking assistance from Chanooka Wish. Assistance can be in many forms for example; food, clothing or special holiday assistance. To determine eligibility this form must be completed in its entirety. It is extremely important that all information is filled out to the best of your knowledge. Any informality will forfeit your right to receive assistance from Chanooka Wish now and in the future.

Name: _____

Mailing Address: Same as residential address Different than residential Address: _____

Residential Address: _____

Phone # _____ Cell # _____

(Required) Your Email Address: _____

Total number of **your children** living at residential address _____

Total number of Adults living at your residential address _____

Have you received assistance from Chanooka Wish in the past YES NO

Did you sign up for any other similar program in Grundy/ Will County (if so which one? This does not disqualify you unless you do not tell us)

Check all that apply:

On the School's Free or reduced Lunch PROGRAM

Receiving Public Aid

Applied for public aid

Date applied _____

Didn't apply

Receiving Food Stamps \$ _____

Applied for Food stamps

Date applied _____

Didn't apply

Unemployed since _____

Workman's compensation Percentage of Pay _____

Laid Off since _____

Family Tragedy: _____

Please provide 2017 Tax document that shows taxable income. This can cause your application to be held up for approval if not provided. only necessary for those new to CW or if did not fill out one for School Supplies Program. Questions just call us 815-521-2850

I, (Print Name Here) _____, certify that the information I have provided is accurate and complete. I authorize Chanooka Wish to verify this information. I understand the following eight points: **1.** If information I have provided proves to be inaccurate or untrue that I may be disqualified from this program and others provided by Chanooka Wish; **2.** This is an income-based program — filling out this application does not guarantee assistance; **3. My ability to receive assistance is based on my ability to turn in my completed application on time with all the required proof of my income;** **4.** My ability to receive assistance is based on the availability of organizations and individuals willing to adopt families; **5.** Assistance is provided on a first-come, first-served basis; **6.** Items my family receives are due to the generosity of others who are doing their best to help those in need — an attitude of gratitude toward these organizations and individuals is appropriate; **7.** Any abusive behavior toward adopting organizations and individuals or Chanooka Wish staff or volunteers may result in future disqualification from Chanooka Wish programs; **8.** I will receive assistance from only one organization in Grundy County and notify Chanooka Wish if accepted from another organization.

Signed _____ Date _____

Special Circumstances: If there is a special situation you would like us to know, when determining eligibility, please describe below (*provide additional sheets if necessary*) and provide documentation that supports your claim.

2018 Check List: to be returned-

_____ **Main Application**
_____ **Taxes 2017**

If you filled out the Application for Assistance “Main Form in 2018 then you do not need to submit the information again for 2018 Thanksgiving, Christmas or Easter 2019.

Return to Chanooka Wish:

1. Email to Carolyn or Charlene
2. Chanooka Wish
PO Box 306 Channahon IL
60410
3. Drop off at Channahon Village
Hall Front counter
4. Drop off at Minooka Village
Hall

2018-Application Due Back on Nov. 5th

Last Name: _____

Requesting: Thanksgiving Assistance:

Food Basket:

Requesting: Christmas Assistance: (Due back no later Nov 9th if not doing Thanksgiving)

Food Basket

Please mail your completed application back to Chanooka Wish by the above listed date. Thank you in advance for your cooperation.

Chanooka Wish
P.O. Box 306
Channahon, IL 60410

Christmas Application

First Name (only)	Age	Gender	Wish List (It is essential that you include some information here that will help those purchasing gifts for your child. Please be <i>realistic</i> with your suggestions—	Clothing Size- pant size- shirt pants

Application is for children 16 years of age or younger. If you need more space please use back of application.