



United Way of Whiteside County



UNITED WAY OF WHITESIDE COUNTY AND TRI-COUNTY OPPORTUNITIES COUNCIL APPLICATION FOR COVID-19 BASIC NEEDS ASSISTANCE PROGRAM (BNAP)

Applicant Name: _____

Applicant Permanent Address: _____

Applicant phone number: (____) _____ How many in your household: _____

Number of adults currently working in your household: _____(Full Time) _____(Part Time)

Household's gross income the past 30 days: _____

Applicant current or former employer: _____

Date you were laid off, let go, or cut back: _____

Date you may be re-hired according to current information: _____

Manager name and phone number: _____

What is your specific need: _____

To whom owed: _____ Account No.: _____

How much is the bill: _____ Covering what period (date): _____

I am unemployed or have lost tips or wages due to the COVID-19 emergency. I give consent to release the information provided above between the United Way of Whiteside County, Tri-County Opportunities Council, and the City of Fulton.

Applicant Printed Name: _____ Date: _____

Applicant Signature: _____

Required Documentation for Assistance

Utility bill of current residence (for proof of address).

Last pay stub (for proof of employment).

Employer's certification of job loss.

Copy of driver's license or state identification card with photo (for proof of identity).

Funds to be paid directly to vendor.

Funds are being made possible through grants secured by the United Way of Whiteside County and Tri-County Opportunities Council.

United Way of Whiteside County
502 1st Avenue, P.O. Box 806
Sterling, IL, 61081
PH: (815) 625-7973.
www.uwwhiteside.org
Email: Diana@uwwhiteside.org

Tri-County Opportunities Council
405 Emmons Avenue
Rock Falls, IL 61071
PH: (815)625-7830
www.tcochelps.org
Email: neddie@tcochelps.org

Office Use: Verification documentation and contacts completed by: _____

Date Payment Made and to Whom: _____