

		City		Under		Will	Date	
		County		Over		Will Not	Time	
ID #	Appl. Rec'd	Residence	Qualifier (C D S)	Income	E/NE-Initials	W/NW	Shopping	Data Entry

## Bedford Community Christmas Station Application 2011

**\*\*Please Print Clearly\*\***

Name: _____			Home(or Cell) Phone: _____		
OR a phone number where a message can be left for you: _____			_____		
Home Address (911 Street Address) _____			Mailing Address (If Different) _____		
_____	_____	_____	_____	_____	_____
City	State	Zip Code	City	State	Zip Code

List ALL ADULTS at this Address:	M/F	Age	Relationship to You	Dis-abled?	SS # Required for each adult
(Your Name) _____	_____	_____	<u>Self</u>	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

**Children under age 19 who are born as of the date of this application (today)**

<b>Child's Name</b> _____	M/F	Age on 12-1-11	Relationship to You	Child's School & Grade
Sizes: Pants _____	Tops: _____	_____	Special Interests: _____	Special Requests: _____
Sizes on December 1, 2011 _____				
<b>Child's Name</b> _____	M/F	Age on 12-1-11	Relationship to You	Child's School & Grade
Sizes: Pants _____	Tops: _____	_____	Special Interests: _____	Special Requests: _____
Sizes on December 1, 2011 _____				
<b>Child's Name</b> _____	M/F	Age on 12-1-11	Relationship to You	Child's School & Grade
Sizes: Pants _____	Tops: _____	_____	Special Interests: _____	Special Requests: _____
Sizes on December 1, 2011 _____				
<b>Child's Name</b> _____	M/F	Age on 12-1-11	Relationship to You	Child's School & Grade
Sizes: Pants _____	Tops: _____	_____	Special Interests: _____	Special Requests: _____
Sizes on December 1, 2011 _____				

\*\*\*\*School and Grade MUST be included\*\*\*\*

**Monthly earned income – List ALL persons living in the household who are employed:**

Name of Working Person	Employer	Employer Phone #	Income Before Taxes
_____	_____	_____	_____
_____	_____	_____	_____

**Other Income for ANY Member of the Household (including Children):**

Temporary Assistance to Needy Families (TANF) _____	\$ _____	Other Disability-----\$ _____
Supplemental Security Income (SSI)-----\$ _____	\$ _____	Pension-----\$ _____
Social Security-----\$ _____	\$ _____	Child Support-----\$ _____
Social Security Disability (SSA)-----\$ _____	\$ _____	Other-----\$ _____
Unemployment/Worker's Comp-----\$ _____	\$ _____	

**Total MONTHLY Income from ALL Sources-----\$ \_\_\_\_\_**

(OVER)

Application 2010

\*\*Each child must LIVE IN YOUR HOME **AND** be in your legal and physical custody in order to be included on this application.

Families are only permitted to receive Christmas assistance from **ONE** program per year. List the names of all places where you **have already applied** for Christmas assistance this year:

By applying for assistance with the Christmas Station, **you are agreeing not to apply to or accept assistance from any other Christmas assistance program.** Failure to report other programs that you have talked to, or talking to another program about Christmas assistance after being accepted to shop at the Christmas Station, will cause you to be denied assistance from the Christmas Station for at least one year.

Do you want to earn additional gift items by attending a workshop during set-up days? Yes No

Will someone else need to shop for you? Yes No If yes, give the person's name: \_\_\_\_\_ \*

\*Please remember to give that person a note giving him/permission to choose your items on your behalf.

Family Food Basket (Choose): \_\_\_\_\_ Regular \_\_\_\_\_ Low Salt \_\_\_\_\_ Low Sugar

The information on this application is correct to the best of my knowledge. I agree that if I fail to provide complete and accurate information, my eligibility will be withdrawn and my shopping appointment will be canceled. I understand that filling out this application **DOES NOT GUARANTEE** that I will be accepted to shop at the Christmas Station, **even if I meet eligibility requirements.** I understand that it is **MY RESPONSIBILITY** to bring all information and documentation that is needed in order to screen this application. That includes:

- my photo ID
- proof of ALL household income: check stubs for one month, letter from employer, letter from government agency that lists current monthly benefits, recent bank statement showing deposits, OR 2010 W-2 form - only if self-employed
- a current benefits Notice of Action from Social Services if applicable
- a birth certificate or insurance card for each child in the home, and
- a school document if the child attends school or is home-schooled

I understand that if I am not eligible for the Bedford Community Christmas Station, I may be eligible for other Christmas assistance. My signature below authorizes Bedford Christmas Station volunteers to **obtain and release** documentation necessary to establish my eligibility for assistance and to allow other agencies to determine eligibility for their services.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Witness: \_\_\_\_\_ (Christmas Station Volunteer)

Applications must be at or below 125% of the Federal Poverty guidelines AND reside in Bedford City or County. Additionally, each household must have one or more of the following qualifiers:

1. dependent children in the home. (18-year-olds must be enrolled full-time in public school to qualify)  
Home-schooled children meet eligibility requirements, but students in part-time GED programs do not.
2. a household member who is age 60 or older
3. a household member who receives Social Security Disability income, Supplemental Security Income, or other disability income
4. recently experienced a catastrophic event that was beyond your control such as house fire, sudden serious illness or injury of head of household, or VERY RECENT loss of employment by head of household

**Only one application per household. If more than one family lives at your address, list everyone on a single application and get one shopping ticket. Applicants must appear in person during a scheduled screening day to submit an application. Applications will be screened on the following dates at the following locations:**

<b>Monday, October 24</b>	1 - 5 Bedford Library	<b>Friday, November 4</b>	10 - 2 Bedford Library
<b>Tuesday, October 25</b>	10 - 2 Bedford Library	<b>Saturday, November 5</b>	10 - 2 Bedford Library
<b>Wed, October 26</b>	1 - 5 Bedford Library	<b>Sunday, November 6</b>	1 - 5 Bedford Library
<b>Thursday, October 27</b>	1 - 5 Bedford Library		

Applications **cannot** be mailed in, sent in to a school or dropped off at the library when Christmas Station volunteers are not on-site to screen the application. For more information, call 540 875-8854.

Bedford Community Christmas Station is an all-volunteer, community-wide effort. Thank you for your interest and Merry Christmas!