



Masjid Ibrahim

This application is intended for evaluating the Application seeking financial assistance

- One application per household must be submitted by the head of the household only.
- All Questions must be answered fully.
- Incomplete applications will be disregarded.
- All applicants must attach a detailed letter explaining their necessity
- Applying for assistance does not guarantee that the assistance will be approved / granted.
- The applicant is advised to find other sources to satisfy his/her needs and not wait to hear back from the masjid.
- Applicant hears back from the masjid only if there are any questions or if the assistance is approved.
- Masjid Ibrahim reserves the right to conduct background search on all applicants.

Name: _____
First MI Last

SSN # : _____

Driver license #: _____

Address: _____

Telephone {) _____

Is this the first time you applied: YES [] NO [], if **NO** how much money have you received from the masjid in the last two years: \$ _____

What amount of money /month are you requesting? \$ _____ & for how long? _____ Months

How often do you attend Masjid Ibrahim?

—

Who is your reference in masjid Ibrahim?

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Married [] Single [] If you are a married women explain why your husband is not sponsoring you



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Number of children under the age 18 and not married in the household:

Do you share the house with someone else even if it's a family member? YES [] NO [], If yes what are their financial responsibilities:

Do you have a full time job YES [] NO [], If NO please explain the last full time job and monthly income from the job: \$ _____

Do you have a part time job YES [] NO [], If NO please explain the last part time job and monthly income from the job: \$ _____

Your monthly income:

\$ _____

Do you receive any assistance for the government?

Housing or housing money: Yes [] No [] _____ : \$ _____

Water or Electricity: Yes [] No [] _____ : \$ _____

Food Stamps: Yes [] No [] _____ : \$ _____

Others: Yes [] No [] _____ : \$ _____

Have you requested financial assistance from other mosques/charitable organizations? YES [] NO [], If YES list the organizations and amount that you have received from them in the last 6 months: \$ _____

Regardless of your savings reason

How much money do you have in hand: \$ _____

How much money do you have in your savings account: \$ _____

How much money do you have in your checking account: \$ _____

How much money do you have in any account: \$ _____

How much money do you have in a safe box or anywhere: \$ _____

Do you own any property anywhere in the world (land / building / machine / treasury bonds / stocks, etc)? YES [] NO [], If YES Please list all the property and their values in \$: _____

Allah is my witness that I have real necessity and provided correct information



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Signature: _____

Date: _____

Masjid Ibrahim will grant monthly assistance for 3 months (at most) at any time. The applicant needs to resubmit an application after 3 months for additional assistance.

