



## ***Benevolence Request Application***

The Benevolence Fund is intended to be a temporary help during a time of financial challenge. Assistance from the Benevolence Fund is intended to be a one-time gift. In unusual circumstances, the Benevolence Fund Committee has the option to provide assistance more than one time.

Disbursements from the Fund may not be in the form of a loan. No gift may be repaid, either in part or in full, in money or labor.

While not a requirement for every situation, a congregant requesting assistance may be asked to receive financial counseling. If this request is made, the Benevolence Fund Committee may provide resources for financial or other counseling.

Those requesting financial support must give the Committee permission to follow up on any of the information provided to the Committee. The Committee will hold all matters in confidence.

The Benevolence Fund Committee consists of the following five persons: The Senior Minister; the Community Care Coordinator; one Board Member; and two members of the Compassionate Community Service Team (one may be a congregant appointed by this team).

### ***Recipients of Assistance***

Recipients of assistance from the Benevolence Fund shall be:

1. Congregants (voting members or regular attendees) of Unity of Fairfax; or
2. Employees of the church. The Fund can assist staff members in need; however, these gifts must be taxed as income according to IRS guidelines in Publication 526.

IRS guidelines exempt members of the Board of Trustees and their families from receiving benevolence from Unity of Fairfax due to the trustees' position of influence on the tax-exempt organization.

Current IRS guidelines should be consulted, but at the time the Fund was launched, gifts from a Church Benevolence Fund were not considered taxable to the recipient unless they are employees of the church.

## ***Criteria***

The stated purpose of the Benevolence Fund is to meet people's basic needs. Normally, these needs are defined as, but are not limited to, the following:

1. Primary lodging (mortgage or rent)
2. Utilities (electric, natural gas, water, sewer, trash)
3. Medical services
4. Transportation to or from a place of employment
5. Funeral expenses
6. Initial evaluation and professional counseling
7. Repair of primary vehicle
8. Groceries
9. Basic clothing

## ***Application Process***

Generally, assistance from the Benevolence Fund to a recipient or household cannot exceed a maximum amount within a 12-month period (the 2019 maximum is \$2,000). The Benevolence Fund Committee will govern the amount of assistance offered according to the limit in place at the time of request. This limit will be determined every January by the Committee depending on the amounts available in the Fund. In very unusual circumstances, households and individuals who are in need of substantial funds and who have the opportunity to make a life-changing decision may continue to be assisted up to whatever limit the Committee deems appropriate. However, such cases must be reviewed carefully and additional accountability must be sought. The level of assistance per situation must be reviewed by all Committee members and approved by a majority of the Benevolence Fund Committee.

To prevent depletion of the fund, disbursements to any one individual or family cannot exceed more than half of the amount in the Fund at the time of the request. The application process is outlined below:

1. Complete the application form on the following pages 4-6 or obtain a copy of "Benevolence Request Application" from the church office or by email from the Community Care Coordinator at [care@unityoffairfax.org](mailto:care@unityoffairfax.org). Pages 4-6 must be completed fully, with all supporting documentation attached. To maintain confidentiality, applications must be submitted directly to the Community Care Coordinator or to the Senior Minister.
2. The application will be reviewed by members of the Benevolence Fund Committee. The Committee may contact the applicant for additional information or to schedule a meeting. The Committee may also contact utility companies, landlords, etc. to verify

need.

3. Review and approval of the application, as well as written communication of the amount and form of assistance, shall be done by the Benevolence Fund Committee at the earliest practicable date.
4. A designated member of the Committee will contact the applicant both verbally and in writing (email or letter) with the decision and an explanation of why the decision was reached. If the Committee determines that the applicant is eligible for assistance, it will make the applicant aware of the amount and how the funds will be disbursed.

No disbursements will be made directly to the applicant. Disbursements will be made only directly to third party service providers. In all cases, the Benevolence Fund Committee reserves the right to award an amount less than the amount requested.

Please see the following pages for the application form and confidentiality form.

## **Unity of Fairfax Benevolence Request Application**

Application Number (to be filled in by the Committee) \_\_\_\_\_

Date of application \_\_\_\_\_ Date funds needed \_\_\_\_\_

Name of Person(s) Requesting: \_\_\_\_\_

Current Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Email \_\_\_\_\_

Current Phone \_\_\_\_\_

Contact Person (if different from applicant): \_\_\_\_\_

Gender:  Male  Female Age: \_\_\_\_\_ Marital status: \_\_\_\_\_

Total amount of request: \_\_\_\_\_

Briefly, explain your needs and what led you to request assistance (attach additional pages if necessary): \_\_\_\_\_

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To whom should payments be made? I give permission for Unity of Fairfax to contact the following vendors or organizations to which payments are requested:

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Have you received assistance from Unity of Fairfax in the past? If so, when and what was the assistance for?

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Are you willing to receive financial counseling? \_\_\_\_yes \_\_\_\_no

Are you currently employed \_\_\_\_ yes \_\_\_\_no \_\_\_\_full-time \_\_\_\_part-time

Name of employer \_\_\_\_\_

Total number of people in household\_\_\_\_\_

Total monthly household income \_\_\_\_\_

Total monthly household debts \_\_\_\_\_

What steps have you taken to obtain financial assistance from non-church sources? \_\_\_\_\_

\_\_\_\_\_

How will you meet these financial obligations going forward? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Is there anything else you think we need to know about your request? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\*\*\*My signature below guarantees the information provided in this application is accurate and true. I also understand that benevolence from this church is a one-time gift and cannot re-apply for another request for a period of 12 months from the date of this application.

\*\*\*My signature below also acknowledges my agreement to allow the Benevolence Fund Committee permission to follow up on any of the information provided in this application, including contacting the vendor/business/services requiring payment. At the discretion of the Benevolence Fund Committee, documentation regarding income and expenses may be requested.

Signature of person/persons requesting assistance

\*\*\* \_\_\_\_\_

Date\_\_\_\_\_

Please see next page for Confidentiality Form-----

All applicants for funding must sign:

**CONFIDENTIALITY FORM FOR UNITY OF FAIRFAX BENEVOLENCE FUND**

I, \_\_\_\_\_, agree that I will not discuss my application, including the amount received, with other congregants (voting members and regular attendees) of the Unity of Fairfax community, with the exception of members of the Benevolence Fund Committee.

**SIGNATURE:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

Committee Use Only

\_\_\_\_ Approved (Amount: \_\_\_\_\_)      \_\_\_\_ Denied

\_\_\_\_ Need more information: \_\_\_\_\_

Decision made via: \_\_\_\_ email    \_\_\_\_ phone    \_\_\_\_ meeting

Reasons for decision: \_\_\_\_\_

\_\_\_\_\_

Committee members making the decision: \_\_\_\_\_

\_\_\_\_\_

Committee member responsible for communicating decision to applicant: \_\_\_\_\_

Date communicated: \_\_\_\_\_

Method of communicating decision: \_\_\_\_\_