**Chinese Christian & Missionary Church (CCMC)**

6901 Williamsburg Boulevard, Arlington, VA 22213, USA.

**Benevolence Fund – Application Form**

(August 9, 2020)

It is important that prospective applicants review the CCMC Benevolence Fund Policy document
(August 9, 2020) before beginning to complete this application form.

**CCMC Benevolence Fund – Application Form**

1. Name of applicant (in English; required): 請單擊此處輸入英文名字。Click here to type

2. Name of applicant (in Chinese): 請單擊此處輸入中文名字。Click here to type

3. Home address: 請單擊此處輸入家庭地址。

請單擊此處輸入家庭地址。

4. Contact phone number(s): 請單擊此處輸入聯係電話。

5. Email address(es): 請單擊此處輸入電郵地址。

6. Profession: 請單擊此處輸入職業。

7. Current employment status: 請單擊此處填寫工作狀態 (如失業、待業、全職)。
(e.g., fully employed; partly employed; furloughed; unemployed; retired; student)

8. Health status: 請單擊此處填寫健康情況。
(e.g., healthy; name of disease)

9. Compared to normal total household income just prior to current financial difficulty, what is an approximate percentage reduction in household income?

請單擊此處填寫收入**比例**影響，即與疫情開始前相比，全家收入減少了**多少百分比**。

10. Reason(s) for financial need (e.g., medical expense challenges; need for basic living necessities. Please explain in detail, to the extent possible.)

請單擊此處填寫申請關愛基金的原因 (如醫療費用，基本生活需要，請盡可能詳細)

11. Dollar amount of financial need (please itemize in detail, to the extent possible)

請單擊此處填寫需要的金額，可以分項目列出

If there are other member(s) living in your household, please continue to the next page.

**Other Household Member(s)**

**Household Member No. 2:**

Name (in English; required): 請單擊此處輸入。

Name (in Chinese): 請單擊此處輸入。

Profession: 請單擊此處輸入。

Current employment status: 請單擊此處輸入。
(e.g., fully employed; partly employed; furloughed; unemployed; retired; student)

Health status: 請單擊此處輸入。
(e.g., healthy; name of disease)

**Household Member No. 3:**

Name (in English; required): 請單擊此處輸入。

Name (in Chinese): 請單擊此處輸入。

Profession: 請單擊此處輸入。

Current employment status: 請單擊此處輸入。
(e.g., fully employed; partly employed; furloughed; unemployed; retired; student)

Health status: 請單擊此處輸入。
(e.g., healthy; name of disease)

**Other Household Member(s)**

**Household Member No. 4:**

Name (in English; required): 請單擊此處輸入。

Name (in Chinese): 請單擊此處輸入。

Profession: 請單擊此處輸入。

Current employment status: 請單擊此處輸入。
(e.g., fully employed; partly employed; furloughed; unemployed; retired; student)

Health status: 請單擊此處輸入。
(e.g., healthy; name of disease)

**Household Member No. 5:**

Name (in English; required): 請單擊此處輸入。

Name (in Chinese): 請單擊此處輸入。

Profession: 請單擊此處輸入。

Current employment status: 請單擊此處輸入。
(e.g., fully employed; partly employed; furloughed; unemployed; retired; student)

Health status: 請單擊此處輸入。
(e.g., healthy; name of disease)

**Other Household Member(s)**

**Household Member No. 6:**

Name (in English; required): 請單擊此處輸入。

Name (in Chinese): 請單擊此處輸入。

Profession: 請單擊此處輸入。

Current employment status: 請單擊此處輸入。
(e.g., fully employed; partly employed; furloughed; unemployed; retired; student)

Health status: 請單擊此處輸入。
(e.g., healthy; name of disease)

**Household Member No. 7:**

Name (in English; required): 請單擊此處輸入。

Name (in Chinese): 請單擊此處輸入。

Profession: 請單擊此處輸入。

Current employment status: 請單擊此處輸入。
(e.g., fully employed; partly employed; furloughed; unemployed; retired; student)

Health status: 請單擊此處輸入。
(e.g., healthy; name of disease)