

## **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): \_\_\_\_\_

2. Name of applicant (in Chinese): \_\_\_\_\_

3. Home address: \_\_\_\_\_

\_\_\_\_\_

4. Contact phone number(s): \_\_\_\_\_

5. Email address(es): \_\_\_\_\_

6. Profession: \_\_\_\_\_

7. Current employment status: \_\_\_\_\_  
(e.g., fully employed; partly employed; furloughed; unemployed; retired; student)

8. Health status: \_\_\_\_\_  
(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?

\_\_\_\_\_

\_\_\_\_\_



Other Household Member(s)

Household Member No. 2:

Name (in English; required): \_\_\_\_\_

Name (in Chinese): \_\_\_\_\_

Profession: \_\_\_\_\_

Current employment status: \_\_\_\_\_  
(e.g., fully employed; partly employed; furloughed; unemployed; retired; student)

Health status: \_\_\_\_\_  
(e.g., healthy; name of disease)

Household Member No. 3:

Name (in English; required): \_\_\_\_\_

Name (in Chinese): \_\_\_\_\_

Profession: \_\_\_\_\_

Current employment status: \_\_\_\_\_  
(e.g., fully employed; partly employed; furloughed; unemployed; retired; student)

Health status: \_\_\_\_\_  
(e.g., healthy; name of disease)

Other Household Member(s)

Household Member No. 4:

Name (in English; required): \_\_\_\_\_

Name (in Chinese): \_\_\_\_\_

Profession: \_\_\_\_\_

Current employment status: \_\_\_\_\_  
(e.g., fully employed; partly employed; furloughed; unemployed; retired; student)

Health status: \_\_\_\_\_  
(e.g., healthy; name of disease)

Household Member No. 5:

Name (in English; required): \_\_\_\_\_

Name (in Chinese): \_\_\_\_\_

Profession: \_\_\_\_\_

Current employment status: \_\_\_\_\_  
(e.g., fully employed; partly employed; furloughed; unemployed; retired; student)

Health status: \_\_\_\_\_  
(e.g., healthy; name of disease)

Other Household Member(s)

Household Member No. 6:

Name (in English; required): \_\_\_\_\_

Name (in Chinese): \_\_\_\_\_

Profession: \_\_\_\_\_

Current employment status: \_\_\_\_\_  
(e.g., fully employed; partly employed; furloughed; unemployed; retired; student)

Health status: \_\_\_\_\_  
(e.g., healthy; name of disease)

Household Member No. 7:

Name (in English; required): \_\_\_\_\_

Name (in Chinese): \_\_\_\_\_

Profession: \_\_\_\_\_

Current employment status: \_\_\_\_\_  
(e.g., fully employed; partly employed; furloughed; unemployed; retired; student)

Health status: \_\_\_\_\_  
(e.g., healthy; name of disease)