

www.Rworld.com/Foundations

Main: 954-563-7261 – Direct: 561-727-2756 -Fax:561-249-7867

Grant Process: Thank you for reaching out to us in your time of need, please complete the application.

• Complete all information:

An incomplete application will not be accepted for consideration, should no information be required in a section, please insert "N/A", indicating no-information for this section.

This is a legal document and is subject to State and Federal audit. Falsification of facts may lead to legal action.

The Applicant(s) understands and grants permission for this application to be subject of confidential review, by Trustees of the Broward REALTOR Charitable Foundation.

> Applicant's Signature	Date
Print Name Clearly:	
Applicant's Representative Signature:	Date:
Print Name Clearly:	
	N FOR ASSISTANCE
An application submission is not a	a guarantee of assistance funding.
A. Applicant's Information: Date:	Covid-19 Related? Y N If yes, also complete Covid-19 Sec
Full Name:	y yes, and complete community
Home Address:	Cit <u>y:</u> ZipCode
Telephone: Mobile:	/Text: <u>□Y or □ N;</u> email:
	No. DNo. Application data.
Have you previously made application with us?	Tes I no Application date:



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3.	Immediate Family Inform	nation:		Living w/Yo
	1.	Relationship	Age:	
		Relationship		
	3.		Age:	
	4.	Relationship	Age:	
	5.	Relationship	Age:	
Ţ.	Current Living Arrangel someone, other than mentioned about		be arrangements with time-lines, include if	you are living with
).	Current Source(s) of Inc	ome & Amount:		
	□Employment 1:	\$/Hr.	□Unemployment: \$	per
	□Employment 2:	\$/Hr.	□Food Stamps: \$	per
	☐Social Security	\$		per
	□Child Support	\$	\square Alimony: \$	per
	☐Family Support	\$	☐Church Support: \$	per
	□Other:	\$	□Other: \$	per
ti	onal Comments for conside	ration:		
•	Employment Record:			
	Applicant #1:			
	Current Employment:	□Yes □ No Employ	er: Still employe	
	How Long Employed:	Start date:	End date: Still employe	d date: □Y- □ì
	Prior Employment:			
	* *		V/ /N // 4111	
	<u>Company</u>	<u>Position</u>	Years/Months worked	
	Company			
	Company			



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Current Employment:	☐Yes ☐ No Employer: Still employed date: Still employed date					
How Long Employed:	Start date:	End date:	nd date: Still employed date: □Y □			
Prior Employment:						
Company	Position	Years/Mo	Years/Months worked			
4						
5.						
6.						
Financial Assistance Sou	ught, But Not Receive	d:				
Assets:						
	ur home? □ Yes □]	No Mortgage	Balance: \$			
Do you currently own you	ur home? □ Yes □ 1	No Mortgage No Make/Mo	Balance: \$			
Do you currently own you Auto or Motorcycle:	□ Yes □ 1	No Make/Mo	del:			
Do you currently own you Auto or Motorcycle:	☐ Yes ☐ I ? Check Balan	No Make/Modece: \$ Sa	del: vings Balance: \$			
Do you currently own you Auto or Motorcycle: Bank: Checking/Savings?	□ Yes □ 1	No Make/Modece: \$ Sa	del:			
Do you currently own you Auto or Motorcycle: Bank: Checking/Savings?	☐ Yes ☐ I ? Check Balan	No Make/Modece: \$ Sa	del: vings Balance: \$			
Do you currently own you Auto or Motorcycle: Bank: Checking/Savings? Retirement Account(s):	☐ Yes ☐ I ? Check Balan	No Make/Modece: \$ Sa	del: vings Balance: \$			
Do you currently own you Auto or Motorcycle: Bank: Checking/Savings? Retirement Account(s): Applicant's Expenses:	☐ Yes ☐] ? Check Balan \$	No Make/Mocce: \$ Sa Ot	del: vings Balance: \$ her: \$			
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	-19 Related:			
			in contact with been diag	
O 1	f Yes: relationship to you	1?, w	hat is current health statu	S
o A	Are they at home with yo	u?, c	currently living at	or hospita
\circ F	Has anyone been quarant	ined?,]	s anyone furloughed?	relationship
\circ F	Have work hours been re	duced?,	Anyone been laid-off?	work Retn
Address:	:	N. 1.1. /5	Relation	1: 0
Phone #:	:	Mobile/Text: _	Relation	nship?
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In Your Own Words:

Broward REALTORS Charitable Foundation, Inc. 1765 NE 26th St., (Wilton Manors) Ft. Lauderdale FL. 33305

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Please complete this response. It helps us-help others. Thank you.

If your grant is approved by the Trustees, how would this be beneficial to you or your family?

Thank you for allowing us to be of assistance to you and your family at your time of need.