



City Harvest Church
Financial Assistance Application Form 1.1
Crisis Support Program

In line with the Personal Data Protection Act 2012, by submitting this form, I hereby give my consent to City Harvest Church ('CHC') to collect, use and disclose my personal data for the purposes of processing my application, assessing my eligibility, administering disbursements as well as notifying and contacting me regarding any financial assistance-related matters via calls, text messages, post and emails. I am aware that I may update the personal data and/or withdraw the consent provided by me at any time by contacting dpo@chc.org.sg. The CHC PDP Policy and how my personal data will be used is also available at chc.org.sg/pdpa.

APPLICANT'S DETAILS			
Full Name: <small>(as in NRIC/FIN/Passport)</small>			<i>Photo</i>
Mobile No./CHC ID		CG:	
Zone:		Pastor / Pastoral Supervisor:	
Relationship with Recipient:			

RECIPIENT'S DETAILS (If different from the above)			
Full Name: <small>(as in NRIC/FIN/Passport)</small>			
Mobile No./CHC ID:		Gender:	
Marital Status		Date of Birth:	
CG:	Zone:	Pastor / Pastoral Supervisor:	
Address:			
Occupation:		Company Name:	
If unemployed, please state present means of subsistence:			

RECIPIENT'S REQUEST			
Reason for Grant Application:			
Type of Grant: <small>*Please indicate accordingly</small>	<input type="checkbox"/> One Time	<input type="checkbox"/> Monthly	<input type="checkbox"/> Weekly
For Monthly or Weekly Grant, please indicate duration:	_____	to	_____
	<small>dd/mm/yyyy</small>		<small>dd/mm/yyyy</small>
Requested Total Grant Amount: <small>*up to a maximum duration of 6 months</small>			

DID YOU REMEMBER?

- ✓ 1 CLEAR copy of the CPF Statements of all adult family members living in Recipient's household (Transaction History for last 6 months)
- ✓ 1 CLEAR copy of the bank statements of all adult family members living in Recipient's household (Transaction History for last 6 months)
- ✓ 1 CLEAR copy of Recipient's Proof of Mortgage Payment or Tenancy Agreement
- ✓ Copies of Receipts and Invoices as supporting documents for income and expenses

Submission of detailed documents for income and expenses will expedite your application

Please do not submit original documents unless otherwise stated

Please note that the average application processing time is **ONE (1) month
This does not include the fund disbursement*

All recipients are required to attend an interview by CHC or its appointed agent, who will appraise the suitability and eligibility of the recipients and the merits of the application, and thereafter either to approve or reject the application. The Management Board reserves the right to approve or reject an application in its sole and absolute discretion without assigning any reason whatsoever. A review of the recipient's performance will be conducted. Should an recipient's performance be assessed to be unsatisfactory, CHC has the right to reduce, withdraw, suspend or terminate all forms of assistance, and for such period as it deems fit or necessary.