

بِسْمِ اللَّهِ الرَّحْمَنِ الرَّحِيمِ

IN THE NAME OF ALLAH, THE MOST GRACIOUS,
THE MOST MERCIFUL



REQUEST FOR ONE-TIME INDIVIDUAL FINANCIAL ASSISTANCE

1. I, _____ (Full Legal Name) hereby request a one-time charitable financial assistance payment from ICF in the amount of \$ _____.
2. Personal Contact Information:
 - a. Address: _____
 - b. Telephone: _____
 - c. Email: _____
 - d. Employed by: _____
3. I am single/married. Number/ages of family members for which responsible: _____
4. I/We regularly attend ICF (Yes/No). Or I/We regularly attend the following other local Masjid: _____
5. The following ICF or other Masjid individuals know me and can serve as my references
 - a. _____ (Name & Telephone Number)
 - b. _____ (Name & Telephone Number)
6. In addition to ICF, I am also seeking financial assistance at this time from: _____ in the amount of \$ _____.
7. If approved, the funds received from ICF will be used for: _____
8. If this request is for assistance with a recurring/monthly bill, what is your get-well plan for dealing with this expense in the future, in other words, how do you plan to make your payment next month? _____
9. Check should be made out to: (Name of Individual or Company) _____
10. I understand that ICF has limited funds for assisting with personal financial matters, and I have read/been advised about the time-period and dollar limits for which I can request financial assistance. I further understand that any amount I receive through this request is considered charity and I am under no legal or moral obligation to repay the amount received at any time now or in the future. However, should my financial situation improve significantly in the future, I will consider returning the amount I received from ICF to the ICF so that others who may be in need in the future may also benefit from this opportunity.

(Signature)

(Date)

*******THIS PORTION FOR ICF USE ONLY*******

The above request for financial assistance from _____
was reviewed by the ICF Executive Committee on _____(Date) and:

- a. Disapproved
- b. Approved in the Amount of: _____
- c. Forwarded for review by the ICF Shurah.

The above request for financial assistance was reviewed by the ICF Shurah on
_____ (Date) and:

- a. Disapproved
- b. Approved in the Amount of: _____ and/or
- c. Referred for a special collection from the ICF community. A special collection was conducted on _____(Date) and \$_____ was raised and distributed to the applicant.

(Signature of ICF Chairman or EC Representative)

I, _____ hereby acknowledge that my
request for financial assistance was:

- a. Disapproved
- b. Approved in the Amount of: \$_____ and I hereby acknowledge receipt of that amount from ICF on _____ (Date).

I further acknowledge that, regardless of the decision on this financial assistance request, I generally may not reapply for additional financial assistance from ICF within three months from the date of this request.

(Signature)

(Date)