Crowley House of Hope 2023 Share the Love Toy Assistance Program Application

Parent Last Name	Parent First Name		DOB		
Address	City, Zip Code				
Cell Phone	Email				
Number of Children in Household Age 0 t	Age 0 to 10 Number of Children in Household Age 11 to 12 th Grader				
Children List the children ages 0 to 12th graders liv	vina in vour home full time.				
NI NI	DOB	Age	Relationship		
Combined monthly income from employn	nent?	If unem	aployed, for how long?		
Please explain the reason for being unen					
Disability Income \$			Child Support \$		
Social Security Retirement Income \$			Unemployment \$		
TANF \$			Other \$		
Do you receive any of the following? (Che	eck all that apply)				
□ Food Stamps (SNAP)					
□WIC					
□ Medicaid for Children					
□ Housing Assistance					
□ VA Benefits					

APPLICATION INSTRUCTIONS

	Please provide copies of th	e following documents	along with your comi	pleted Share the Lo	ve application.
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Copy of applying adult's identification

Copy of each child's birth certificate

Copy of your current electric or water bill

Copy of proof of income, can be one of the following:

- Last two paycheck stubs
- Award letters for Social Security income or TANF
- Copy of current child support payment history
- Copy of unemployment benefits

Turn in this application and supporting documentation to Crowley House of Hope via mail or by dropping it off to 200 N Magnolia Street

Crowley, Texas 76036

Scan and email this application and supporting documentation to elizabeth@crowleyhoh.org

I understand that I must provide the requested documentation to complete my Share the Love application. Families with complete applications will be contacted to set up their Share the Love appointment and then receive their family letter in the mail.

Incomplete applications will not be considered for Share the Love.

Print Name	
Signature	Date

For questions, contact Elizabeth Becker at elizabeth@crowleyhoh.org

Thank you and we look forward to serving your family this holiday season.