

Benevolence Application Form

Christ Church Cathedral, Fredericton NB



Applicant Information

Name _____

Address _____

Telephone _____ Email _____

Copy of ID provided (e.g. Medicare, Diver's License, SIN etc.) Yes

What is your request?

Are you employed? Yes No

If YES, where? _____ Supervisor contact _____

Have you received financial help from another church or social agency in the last 30 days? Yes No

If YES, what? _____

Have you received help from Christ Church Cathedral in the past six months? Yes No

If YES, when and why? _____

MY SIGNATURE INDICATES THAT THE INFORMATION I HAVE PROVIDED IS TRUE AND ACCURATE.

Signature _____ Date _____

For Cathedral Office use:

Request referred by _____ Decision _____

Type of payment (e.g., cheque issued, gift card, payment on account, etc) _____