

Coeur d' Alene Press Christmas Year Round Application for 2021

Referring Partner: _____

APPLICANT INFORMATION:

Full Name:		
Address:		
City:	State:	Zip:
Phone:	Email Address:	
Last 4 SSN:	Driver's Lic # and State:	
Birthdate:		
Name of Spouse/Significant Other:		
Birthdate of Spouse/Significant Other:		
Phone of Spouse/Significant Other:		
Names/Ages of Other Household Members:		
Number of Children in Household	Number of Adults in Household	Total Number in Household
Applicant Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Other <input type="checkbox"/> Unknown <input type="checkbox"/> Refused	
Marital Status	<input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Partnered <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Unknown <input type="checkbox"/> Refused	
Ethnicity	<input type="checkbox"/> American Indian/Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian/Other Pacific Islander <input type="checkbox"/> White <input type="checkbox"/> Non-Hispanic/Latino <input type="checkbox"/> Hispanic/Latino <input type="checkbox"/> Other <input type="checkbox"/> Unknown <input type="checkbox"/> Refused	
Employment Status	<input type="checkbox"/> Employed <input type="checkbox"/> Unemployed <input type="checkbox"/> Disabled <input type="checkbox"/> Retired <input type="checkbox"/> Other <input type="checkbox"/> Unknown <input type="checkbox"/> Refused	
Education	<input type="checkbox"/> Nursery School to 4 th Grade <input type="checkbox"/> 5 th Grade or 6 th Grade <input type="checkbox"/> 7 th Grade or 8 th Grade <input type="checkbox"/> 9 th Grade <input type="checkbox"/> 10 th Grade <input type="checkbox"/> 11 th Grade <input type="checkbox"/> 12 th Grade <input type="checkbox"/> High School Diploma <input type="checkbox"/> GED <input type="checkbox"/> Post-Secondary Education <input type="checkbox"/> Other <input type="checkbox"/> Unknown <input type="checkbox"/> Refused	
Military Service	<input type="checkbox"/> None <input type="checkbox"/> Active Duty <input type="checkbox"/> Reserves <input type="checkbox"/> Discharged <input type="checkbox"/> Retired <input type="checkbox"/> Unknown <input type="checkbox"/> Refused	

Biggest Challenge:

Achievement:

Please share your current need for an item or items that would help you and your family thrive and continue to move forward:

Have you received an award from Christmas for All in the past? _____

Are you working with other organizations to help meet your current need? _____

If so, which organization and how much? _____

The Coeur d'Alene Press sponsors this program and provides the funding through donations from readers and the community. They want to share your stories and successes in order to keep the donations coming for future needs. PLEASE SIGN ON THE LINE BELOW IF YOU ARE WILLING TO SHARE YOUR STORY PUBLICLY.

REFERRING PARTNER RECOMMENDATION (Mandatory)

Please tell us a few things about this applicant that make them a great candidate for the Christmas Year Round program:

If the applicant is on an official Case Management Plan through your organization and they are meeting their agreed upon goals, their applicant portion of the cost of an award from Christmas Year Round will be reduced by 20%. Is this applicant on an official Case Management Plan and meeting their goals with your organization?

Yes _____ No _____

Scan and save this application using the following file naming convention:

RPName.CYR2021.ApplicantFirstLastName.Need1.Need2.pdg

Upload to Box.com in assigned folder

Maintain a master list of all the people for whom you've submitted applications