

Christmas in April * St. Mary's (an affiliate of Rebuilding Together)
P.O. Box 705
Hollywood, MD 20636

APPLICATION FOR ASSISTANCE

Please complete and return by October 15, 2010

All portions of this application must be completed in full. Christmas in April reserves the right to reject incomplete applications. If necessary, get help so that rejection for incompleteness does not occur.

Christmas in April * St. Mary's County is a local chapter of Rebuilding Together, a national volunteer organization that, in partnership with the community, rehabilitates the houses of low-income homeowners, particularly the elderly and disabled, so that they may live in warmth, safety and independence. We also provide help through work on community facilities.

After months of extensive planning and preparation, our work occurs primarily in the month of April, culminating in a National Rebuilding Day, Saturday, April 30, 2011. Volunteers work for six to eight hours and **may not be able to complete all repairs desired**. If your home is chosen for the Christmas in April program, there will never be a charge for our service.

Name(s) and Age(s) of Homeowner(s): _____

Street Address: _____

Mailing Address (if different from Street Address): _____

Homeowner's Telephone Number: _____

Contact Person: _____ Telephone No.: _____

Directions
(Exact, detailed road directions--and landmarks--to your home)

Directions to your home: _____

List names and ages of all persons residing in the home (homeowner must reside full-time in the home):

Name	Age	Disability, if any
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Name	Age	Disability, if any
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Name	Age	Disability, if any
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Name	Age	Disability, if any
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If homeowner is disabled, indicate special needs (wheelchair or walker, hearing impaired, sight, etc.

The total combined income for the occupant(s) of this home is:

\$ _____ Income (per month)

Are you, or anyone else residing in your home, presently working at a job?

_____ Yes _____ No **If yes, where** _____

Do you, or anyone living with you, operate a business from your home? _____

Besides this money from income, do you, as homeowner(s) have any other source of funds? For example: savings accounts, trust accounts, annuities, etc.? If so, explain:

Have you ever received rehabilitation assistance (for example: weatherization)

Yes No

If so, from whom? _____

Have you received assistance from Christmas in April in the past?

Yes No

If so, in what year did you receive assistance? _____

Why do you feel you should be selected for the Christmas in April program and how will it help you? Please give us information about yourself that will be helpful in evaluating your application.

Widowed Unemployed Unable to work
Veteran
 Disabled Widow of Veteran Other (i.e., single parent, family member disabled) _____

What repairs do you feel are needed at your house that Christmas in April could handle in one day?

Roofing repairs Painting Plumbing Repairs
 Electrical repairs Appliances Flooring
 Heating repairs Cleaning Trash Removal/
Handicap Access/
(Indoor/ Outdoor) Yardwork Renovations
 Weatherstripping Window/ Other

Door Repair _____

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What is your category of residence?

_____ Trailer _____ Townhouse _____ Single-family dwelling _____
Double-wide

If you are selected by the Christmas in April program, would you be willing to have your picture taken and/or be interviewed by the press (for example: The Enterprise) or Christmas in April volunteers? _____ Yes _____ No

Please Sign: I confirm that any persons residing in my home or visiting for the project day, April 30, 2011, who are **physically able** will work alongside volunteers. In addition, I own the property at the address given, can produce **mortgage payment book, deed, property tax receipt, or other documents** as proof of ownership **on the day my home is previewed**. I personally reside in my home.

Signature of Homeowner

If someone other than the homeowner prepares or helps prepare this form, please complete the following:

Is the homeowner aware of this application? _____ Yes _____ No

Name of person preparing, assisting, or referring this application:

Name

Daytime Phone Number

Agency or Relationship to

Signature

Applicant

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You will be visited by a member of the Christmas in April * St. Mary's County House Selection Committee to review your application and inspect your home for potential improvements. You will be contacted about the inspection visit sometime in the Fall of 2010.

If you find that you have any changes to make to this form, after you have mailed in the completed application, please call Christmas in April * St. Mary's County at (301) 863-2905.

A letter will be mailed to you in late December 2010 or early January 2011 to inform you whether your home is chosen for the upcoming 2011 Christmas in April program.

Christmas in April * St. Mary's County does not deny equal services to any applicant because of

their race, color, religion, sex, disability, familial status, or national origin.

Please keep this copy for your records—it's has our telephone number on it!