

**CHRISTMAS FOR KIDS APPLICATION 2025****Family #:** \_\_\_\_\_*leave Family # blank***Section 1: Tell Us About Yourself**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Main Phone #: \_\_\_\_\_ 2<sup>nd</sup> Phone#: \_\_\_\_\_

Email: \_\_\_\_\_

Address where you live: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

**You MUST provide a Driver's License or ID with your current address. If the address is not current than a utility bill with the applicant's name and matching address must be provided.**

Drivers License/ID #: \_\_\_\_\_ State: \_\_\_\_\_

Address Verification (if Needed); \_\_\_\_\_

**Section 2: Tell us about your Household Members:** List everyone who lives with you. Answer all questions for each household member. You MUST provide Proof that all members listed reside in your home. (Tax Form/Rental Agreement) If a child is not your biological child, you MUST provide proof of guardianship. (Court Orders/School Paperwork)

Name (First,Middle,Last)	Relationship to Applicant	Date of Birth	Age	Sex M / F	In School Y/N Grade	School If home schooled provide proof	Working Y / N
1	SELF						
2							
3							
4							
5							
6							
7							
8							

Is anyone in the home pregnant?      YES      NO

If Yes, who: \_\_\_\_\_ Due Date: \_\_\_\_\_

**Section 3: Tell us about your Household Income:** Enter Gross Pay not take home pay. A months worth of Pay Stubs/Bank Records required for proof. If there is no income coming into the home we need a written statement about how the household is supporting itself. (ie; rent, food, utilities)

Name of Person Working	Employer	Gross Income	Paid; Weekly/ Bi-Weekly/ Monthly	Verified	TOTAL Income

Is anyone in your household unable to work? YES NO

If yes, who: \_\_\_\_\_

Why is this person unable to work? \_\_\_\_\_

Do you or anyone in your household receive money from other sources? YES NO

Other Income	Amount	How often is this income received?	Which Household member receives this income
Child Support			
SSI			
Social Security Benefits			
Unemployment Benefits			
Veteran's Benefits			
Retirement/Pension			
Other: _____			

**Section 4: Tell us if you receive Food Stamps – MUST provide a Family Profile Form from the DSS Office**

Do you currently receive Food Stamps? YES NO

If Yes, Case #: \_\_\_\_\_

**Section 5: Tell us about any involvement with the Department of Social Services.**

Are you or anyone in your household currently involved in an open DSS treatment case?

This does NOT include receiving Food Stamps or Medicaid.

YES NO

If Yes, who is your DSS caseworker: \_\_\_\_\_

**Section 6: Tell us about current Christmas Assistance.**

Are you currently receiving Christmas Assistance from:

Your Child's School:	YES	NO	School: _____
Salvation Army:	YES	NO	
Toys for Tots:	YES	NO	
United Way:	YES	NO	
Marvin's Kids	YES	NO	Child: _____
Shop with a Bobcat/Warrior/ Razorback:	YES	NO	Child: _____
Shop with a Hero:	YES	NO	Child: _____
Helping Hands:	YES	NO	
Other Charitable Organization:	YES	NO	_____

Have you received assistance from Christmas for Kids in prior years? YES NO

If yes, list years that you received assistance: \_\_\_\_\_

**Please read and sign the statement below:**

I certify that the information I or my authorized representative has provided on this application is correct and complete. I realize that I will be denied services from Christmas for Kids if I knowingly give false information. I also acknowledge that completing an application does not guarantee me acceptance into the Christmas for Kids program.

**Applicant Signature or Authorized Representative:**

\_\_\_\_\_

**Date:** \_\_\_\_\_**LEAVE THIS AREA BLANK. For Christmas for Kids use only:**

Oconee County Resident: YES NO Proof Provided: \_\_\_\_\_

Household members verified: YES NO Proof Provided: \_\_\_\_\_

Total Income: \_\_\_\_\_ Meets Guidelines: YES NO  
Proof Provided \_\_\_\_\_

Food Stamps: YES NO Proof Provided: \_\_\_\_\_

Current DSS Case: YES NO Verified: \_\_\_\_\_

Other Assistance: YES NO Verified: \_\_\_\_\_

APPLICATION: APPROVED DENIED

CFK Representative: \_\_\_\_\_ Date: \_\_\_\_\_