

BESTOWER FOUNDATION™

Spend out of what Lord has provided for you seeking His pleasure alone

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NOMINATION FORM – GRANT FOR UNPRIVILEGED			
NOMINEE			
First Name:		Last Name:	
Address:			
City:		District:	
Country:		Phone:	
NOMINATOR			
First Name:		Last Name:	
Phone:		Email:	
QUESTIONNAIRE & REFERENCES			
<p>A. Please tell us few actions that the nominee performs which show that the nominee is conscious of Allah (swt).</p> <p>B. Please tell us briefly about the nominee, how many family members the nominee has, nominee's profession, how much nominee earns every month and how nominee currently maintain his/her family.</p> <p>C. Please tell us your project plan that can help nominee to overcome the difficult time and how much would it cost to implement the project?</p> <p>D. Provide one reference who knows the nominee and his family very well.</p> <p>1. Name: _____ Phone: _____</p>			
SIGNATURE OF THE NOMINATOR			
<input checked="" type="checkbox"/>	<p>I do hereby certify that above information is correct and true and my nominee is unprivileged.</p> <p><i>NOTE: To sign this form electronically, please type your first name and last name within forward slash (e.g. /ABDUR RAHMAN/, wherein ABDUR is first name and RAHMAN is last name)</i></p>		
Signature:		Date:	