

**Nokesville House Foundation
Confidential Application for Assistance
2020 Form**

Name _____

Address: _____.

Basis for Assistance Request: (circle one or more):

- a) Job Loss
- b) Wage Reduction due to reduced hours
- c) Wage reduction

Are you or a household member drawing unemployment (Yes/No)?

Total net (take home) monthly average before Basis of Assistance listed above:

\$_____.

Current monthly net income, including unemployment benefits: \$_____.

Assistance applied for (circle one & list amount):

1) Monthly Rent - \$_____.

2) Monthly Mortgage - \$_____.

***The Nokesville House Foundation was formed to assist the elderly within the Nokesville Virginia Community with their housing needs to help to keep them in their homes. Application for assistance does not guarantee approval.**

NOTE: There are limited monthly benefits available at this time, but we are looking for other funding, so don't be afraid to apply. Data provided on the application will be seen by the Foundation directors but will be held in strict confidence. Each applicant will be notified within 10 days if assistance can be granted.

Your Contact information:

Phone _____

E-Mail: _____