

East Texas Islamic Society

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APPLICATION FOR HELP FROM ZAKAT/SADAQA FUNDS

Please complete this form and submit to an ETIS board member by mail/email/person. All information on this form is not shared except with members of the ETIS board and/or Zakat Committee for the purposes of this application only.

Recipient Personal Information:

Full Legal Name: _____
Last Middle First

Date of Birth: (mm/dd/yyyy): _____ Gender (M/F): _____ Religion: _____

Address: _____

Telephone: _____ Marital Status: Single _____ Married _____ Other _____

Email Address: _____ Name of Spouse: _____

Social Security #: _____ Do you have children living with you? _____

Driver License #: _____ If yes, how many and their ages? _____

Employment Details:

Employed? Yes _____ No _____ Full-time/Part-time: _____

If yes, Employers Name: _____

Employer's Address: _____

Employers' Phone #: _____

Financial Status Details

Income:

Monthly Salary _____

Spouse Monthly Salary _____

Other Spouse Income _____

Food Stamp / SNAP _____

Supplemental Security Income (SSI) _____

Government Assistance: _____

Other _____

Others: (please specify): _____

Monthly Expenses:

Do you own or rent your house: _____

Rent: _____

Utilities: Gas: _____, Electricity: _____, Water _____

Telephone: _____

Food: _____

Medication: _____

Unpaid Medical Bills (If Any) _____

Others _____

Request Details:

Briefly describe your need?

Amount requested? _____

References / Additional Data:

Please provide 2 references. One reference needs to be someone in the ETIS Muslim community.

Name: _____

Phone: _____ Email: _____

Name: _____

Phone: _____ Email: _____

If requested by ETIS, are you willing to provide copies of the following:

Driver License? **Y** or **N** Pay stub? **Y** or **N** _ Outstanding bills? **Y** or **N**

Late rent/house payment notices? **Y** or **N** Medical bill statement(s)? **Y** or **N**

Other items for which funds will be used to pay for? **Y** or **N**

Recipient Sign Below:

By signing, I certify that the information I submitted is accurate and truthful, and I am a US citizen or lawful resident. I further agree to release the East Texas Islamic Society, its board members, employees and agents and any donors donating to this fund from any claims, demands of action I may have against ETIS as a result of omission, acceptance, rejection, suspension, or termination of my application. Furthermore, I understand that the ETIS may decide not to grant any funds to any applicants if minimum requirements are not met, funds are not sufficient or any other reasons decided by the ETIS board. And I fully authorize the ETIS to conduct any required background checking to process this case, including but not limited to contacting the references mentioned above.

Signature: _____ **Date:** _____

FOR OFFICAL USE ONLY

Application has been: Approved for Zakat _____ Approved for Sadaqa _____

Denied _____ Reason for denial _____

Approved Amount: _____ for Rent____; Food____; Utilities____; Other _____

Signatures Board Members: