

## Holiday Depot Application 2023

**Office Use Only:** Date Reviewed \_\_\_\_\_ Date Entered \_\_\_\_\_  
 Gifts Assigned to: \_\_\_\_\_ Entered: \_\_\_\_\_  
 Food Assigned to: \_\_\_\_\_ Entered: \_\_\_\_\_

**Name:**

*Driver's License or State ID must be emailed for this individual*

Address:

If this is a post office box, please give street address & apt # also

City:                      Zip Code:                      Township:                      School District:

Provide a phone number and a message number in case we need to reach you about your Holiday package.

**MUST HAVE 2 DIFFERENT CONTACT NUMBERS – IF WE CAN'T REACH YOU NO GIFTS!**

Phone Number:

Secondary Phone Number:                      *This number CANNOT be the same as the one above*

**APPLICANTS MUST LIVE IN LAPEER COUNTY**

Food Basket Requested:

TOTAL Number of People in the Household:

List Name of Adult in Household Who Speaks English (if applicable):

*Holiday Depot will not discriminate because of race, sex, religion, age, national origin, color, height, weight, marital status, political beliefs or disability.*

*\*\*By submitting this application I give Holiday Depot permission to release or obtain any information regarding this application to/from community donors or coordinating agencies. I understand giving false information may result in not getting help. Applying does not guarantee I will receive help.*

C or SS	First Name	Last Name	Age	Sex	Veteran	Gift List; List realistic gifts for each person. No item that costs more than \$50. For clothing give size. If person doesn't want anything write NOTHING.
	<i>List all individuals living in the household, whether they want help or not (birth certificate OR social security card must be attached for each child requesting assistance)</i>					

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Are there other individuals/households living at this address? If yes, explain:

Has anyone in this household filled out an application for holiday assistance elsewhere? If yes, explain:

Is there other income in the home? If yes, explain:

Is there anything special about your family (special needs children, etc.)?

Will your family be in Lapeer County for Christmas?

Do you have a current DHS case? If so, list Case # Here: Dates Covered: *DHS Letter must attached*

Do you receive MSHDA? Amount MSHDA Paid \$ Amount Applicant Pays \$ WIC? Bridge Card \$

Name of Employer When did you last work?

*If you do not have a DHS case please fill out your income below and attached 30 days proof of income with application*

Income Source	Amount Monthly	Notes (if required)
SSI/Social Security		
Wages from Job		
Unemployment		
Child Support		
Pension		
Self Employment		
Veteran's Benefits		
Student Loans/Grants		
Other Income		
<b>TOTAL (Office Use Only)</b>		

IF No DHS case and No Income, how does your family get by without any income? Who is helping you?

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After completing form email the form, applicant's drivers license, birth certificate OR social security card for each child, DHS letter OR 30 days proof of income to [info@holidaydepotlapeer.org](mailto:info@holidaydepotlapeer.org)