



Philomath Community Services Holiday Cheer Program Description and Instructions

Holiday Cheer is a program of Philomath Community Services. Our goal is to take limited resources and make a best effort to improve the holiday experience for families in need. We work cooperatively with local businesses, organizations and individuals to bring these services.

If your circumstances are such that you are unable to provide the holiday experience for your family, we may be able to help. To qualified families we provide gifts for children, a food basket for a holiday dinner, a hygiene basket, decorations and wrapping paper as needed. To qualified elderly we provide a gift and food and hygiene baskets.

In order to qualify for services your family must meet the qualifications on the Service Application and have children between 0 and 18 years old living at home.

The number of families served varies from year to year based on funds available and the number of partners we enlist. Please be advised that we cannot guarantee that qualified families will be served or receive requested items. However, if we are unable to serve your family, we will refer you to Vina Moses who operates a similar program. Please do not apply to more than one agency. Information provided is cross-referenced to avoid duplication of services.

Please complete the following Service Application regarding your family and the Child Data form regarding your children. Parents are asked to identify in priority order of clothes needs of the child, what interests them and educational needs. Individual gifts should not be more than approximately \$30 each.

Once we receive the completed application, Holiday Cheer representatives will call you to clarify information and determine the level of assistance that can be met by Holiday Cheer. Names of families and individuals served will remain confidential.

For further information please call and leave a message at 541-929-2499.

Deadline for Application: Friday, November 18, 2016
Notification of Eligibility: Monday, November 21, 2016
Distribution Date: Monday & Tuesday December 19 & 20, 2016



Application for Services Philomath Community Services

360 S. 9th St, Philomath OR 97370
PO Box 1334, Philomath OR 97370
Phone: 541-929-2499

Name (head of household): _____ Date: _____

Mailing Address: _____

Street Address (if different) _____

Phone _____ Email: _____

Number of people in household _____ Referred by: _____

Members of Household: Please write additional names and birth dates on the back of this page.

Name: _____ M/F _____ Birth date: _____

Name: _____ M/F _____ Birth date: _____

Name: _____ M/F _____ Birth date: _____

Name: _____ M/F _____ Birth date: _____

Name: _____ M/F _____ Birth date: _____

Name: _____ M/F _____ Birth date: _____

Name: _____ M/F _____ Birth date: _____

I have read the eligibility requirements on the back of this page. I believe that I am qualified for and I would like to receive the following services provided by Philomath Community Services.

Philomath Food Bank ___ Philomath Community Gleaners ___ June's Kids Klostet ___
Lupe's Community Garden ___ Holiday Cheer _____

Signature of head of household: _____ Date: _____

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Philomath Community Services Program Eligibility Requirements

Philomath Food Bank

To qualify for service from the Philomath Food Bank your income must be under the USDA income guidelines which is 180% of poverty as per the 2016 incomes listed below for your size of family. In addition, you must live within the Philomath Food Bank Service Area.

<u>Number in Family</u>	<u>Annual Income</u>	<u>Monthly Income</u>
1	\$21,775	\$1,815
2	\$29,471	\$2,456
3	\$37,167	\$3,098
4	\$44,863	\$3,739
5	\$52,559	\$4,380
6	\$60,255	\$5,022
7	\$67,951	\$5,663
8	\$75,647	\$6,304
Each additional	add \$7,696	add \$642

Philomath Community Gleaners, Holiday Cheer and Lupe's Community Garden

To qualify for service from the above programs your income must be under the USDA income guidelines which is 200% of poverty as per the 2016 incomes listed below for your size of family. In addition, you should live in the service area of these programs. In the case of Lupe's Community Garden, provided they are available, you may be able to lease a raised bed if not qualified.

<u>Number in Family</u>	<u>Annual Income</u>	<u>Monthly Income</u>
1	\$23,540	\$1,962
2	\$31,860	\$2,655
3	\$40,180	\$3,348
4	\$48,500	\$4,042
5	\$56,820	\$4,735
6	\$65,140	\$5,428
7	\$73,460	\$6,122
8	\$81,780	\$6,815

Each additional add \$8,320 add \$693

June's Kids Kloset

Any child 0-18 years is qualified for service from June's Kids Kloset. Show proof of children's ID.

Adopted 2/16



Holiday Cheer Child Data



Please provide information for each household members age 18 and under

1. M/F _____ Age _____ Favorite Color(s) _____
Pant Size _____ Socks Size & Style _____
Shirt Size _____ Underwear Size & Style _____
Clothing Needs in priority order _____

Toys/Games/Interests/Hobbies _____

Educational _____ Code _____

2. M/F _____ Age _____ Favorite Color(s) _____
Pant Size _____ Socks Size & Style _____
Shirt Size _____ Underwear Size & Style _____
Clothing Needs in priority order _____

Toys/Games/Interests/Hobbies _____

Educational _____ Code _____

Space for additional children is on the back of this page.

I have read the Holiday Cheer Program description and policies and have completed the application and Child Data form. I attest that my family qualifies for Holiday Cheer services. I agree not to request similar support from Vina Moses or other agencies this

year. I hereby give permission to Philomath Community Services to release this information, including names and address, to only those providing services.

Name _____ Signature _____

Mail completed applications to Philomath Community Services, Holiday Cheer, PO Box 1334, Philomath OR 97370 or drop off at 360 S 9th St in Philomath during business hours Tuesday 6-8 PM and Thursday 9 AM – 1 PM. If you have questions please call and leave a message at 541-929-2499.

For Office Use Only Date Application Received: _____ Received By Initials: _____
Date Client called: _____ Information Verified By Initials: _____

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3. M/F _____ Age _____ Favorite Color(s) _____
Pant Size _____ Socks Size & Style _____
Shirt Size _____ Underwear Size & Style _____
Clothing Needs in priority order _____

Toys/Games/Interests/Hobbies _____

Educational _____ Code _____

4. M/F _____ Age _____ Favorite Color(s) _____
Pant Size _____ Socks Size & Style _____
Shirt Size _____ Underwear Size & Style _____
Clothing Needs in priority order _____

Toys/Games/Interests/Hobbies _____

Educational _____ Code _____

5. M/F _____ Age _____ Favorite Color(s) _____
Pant Size _____ Socks Size & Style _____
Shirt Size _____ Underwear Size & Style _____
Clothing Needs in priority order _____

Toys/Games/Interests/Hobbies _____

Educational _____ Code _____

6. M/F _____ Age _____ Favorite Color(s) _____

Pant Size _____ Socks Size & Style _____

Shirt Size _____ Underwear Size & Style _____

Clothing Needs in priority order _____

Toys/Games/Interests/Hobbies _____

Educational _____ Code _____

7. M/F _____ Age _____ Favorite Color(s) _____

Pant Size _____ Socks Size & Style _____

Shirt Size _____ Underwear Size & Style _____

Clothing Needs in priority order _____

Toys/Games/Interests/Hobbies _____

Educational _____ Code _____