

# Oh Yeah! Missions

Please submit your form to one of these addresses or contact us at:

Mailing Address: P.O Box 552 Atoka OK, 74525

Phone 580-889-0013

Fax: 580-889-5773

Email: [ohyeahmissions@gmail.com](mailto:ohyeahmissions@gmail.com)

## Assistance Request Form

Name(s) \_\_\_\_\_

Address \_\_\_\_\_

City/State \_\_\_\_\_

Home and Cell Phone Numbers \_\_\_\_\_

Age(s) \_\_\_\_\_  Single  Married  Divorced  Separated  Widowed

Name and location of home church \_\_\_\_\_

Are you a member of a church? If so, how long?

\_\_\_\_\_

If you have no home church, or you are not a member of a church, briefly explain why.

\_\_\_\_\_

\_\_\_\_\_

Current or Most Recent Employer Information (List for Both You and Spouse):

Name of company or Business: \_\_\_\_\_

Phone: \_\_\_\_\_ Contact Person: \_\_\_\_\_

Name of company or Business: \_\_\_\_\_

Phone: \_\_\_\_\_ Contact Person \_\_\_\_\_

If currently employed, check here:  You  Spouse

Exactly What kind of help are you asking for?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Household Members:

Name	Age	Relation
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

If you have Adult children, please provide contact information in space above.

Briefly explain the circumstances that brought about this need.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Where else have you been in the last year for assistance? How much support did one give?

\_\_\_\_\_

\_\_\_\_\_

List what type of Financial Aid you may be receiving from a government agency.

Unemployment Insurance  Social Security  Workers Compensation  Disability  Other

\_\_\_\_\_

Are you willing to confidentially meet with a benevolent committee who make ask other and personal financial questions?  Yes  No

Would you be willing to meet with a financial budget counselor?  Yes  No

I give my permission to have the appropriate church personnel validate any of the above information

Signature: \_\_\_\_\_ Print Name \_\_\_\_\_

Date: \_\_\_\_\_

All of the above information as well as any information gathered from a Budget Counselor or Benevolent Committee will remain confidential except for those involved in the decision making process.

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_