

**Cave Spring Baptist Church  
Benevolence Request Form**

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

Address: \_\_\_\_\_ Email: \_\_\_\_\_

1. Are you a member of Cave Spring Baptist Church? ☐ Yes ☐ No

2. If no, are you a member at any Church? ☐ Yes ☐ No

3. If a member of Cave Spring Baptist Church, which best describes your attendance?

☐ Frequent ☐ Sometimes ☐ Seldom ☐ Never

4. In your opinion, which description best describes your financial situation?

☐ Short term emergency ☐ Short term problem ☐ Long term problem

5. What is the total amount of your request? \_\_\_\_\_

6. What is the purpose of the request? \_\_\_\_\_

7. Who should the check be made out to? \_\_\_\_\_

8. Are you willing to participate in financial counseling? ☐ Yes ☐ No

9. Are you currently employed? ☐ Yes ☐ No ☐ Full Time ☐ Part Time

Name of Employer: \_\_\_\_\_

10. If married, is your spouse currently employed? ☐ Yes ☐ No ☐ Full Time ☐ Part Time

Name of Employer: \_\_\_\_\_

11. Total number of people in your household: \_\_\_\_\_

12. Total household income: Weekly: \_\_\_\_\_ Monthly: \_\_\_\_\_

13. Briefly, explain your needs and what led you to request assistance:

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Signature: \_\_\_\_\_ (Benevolence Team member or Deacon can assist in completing)

**Church Use Only**

☐ Approved via Email ☐ Approved at Meeting ☐ Need more information ☐ Denied

Committee Review Date: \_\_\_\_\_ Approved Amount: \_\_\_\_\_

Check # \_\_\_\_\_ Date to be Paid: \_\_\_\_\_

Venmo, Cash App or address funds mailed to or person given to: \_\_\_\_\_