



MFCC Holiday Assistance – 2018

Deadline: November 21, 2018
No applications will be accepted after this date

Have you or anyone in your household received services from MFCC in the past year?

- Yes – *Please continue with application*
- No – Do you live in Milton?
 - Yes – *Please continue with application*
 - No – Call 211 for programs serving your area

PLEASE PRINT CLEARLY

Applicant (HEAD OF HOUSEHOLD) Name _____

Address: (Apt #) Street _____ City _____ VT

Phone number(s) _____ DOB _____

(Application will not be processed without above information)

Employer _____ OR Source of Income: Unemployment SSI SSDI

Reach-Up Other _____

Total Annual Household Income:

- ___ Under \$18,850
- ___ \$18,850 - \$26,950
- ___ \$26,951 - \$30,200
- ___ \$30,201 - \$43,100
- ___ \$43,101 - \$56,900
- ___ \$ over \$56,900

Does your family receive services from any of the following:
check ALL that apply

- ___ None
- ___ WIC
- ___ 3Squares
- ___ TFAP
- ___ Head Start/EEE
- ___ Dr. Dynasaur
- ___ other (please list) _____

Questions? Call Kelly, (802)893-1457

Custodial Parent ONLY May Apply

Children under 18 living in household

Please fill out a separate information sheet for each child listed below

Child's Name	Boy / Girl	D.O.B.
	B / G	
	B / G	
	B / G	
	B / G	
	B / G	
	B / G	
	B / G	

Please return this application as soon as possible.

Please list 2 to 3 gift ideas for your child(ren). Gifts listed are **NOT GUARANTEED**. Please **NO CLOTHING**. Children ages 14 to 18 will be placed on a list to receive a Gift Card (**NO GUARANTEES**).

Child's Name	Gift Ideas (ONLY 2-3)

Please share in a few words why you need assistance for the Holidays this year? _____

Signature	Date
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