



50 Maple Stream Road  
East Windsor, NJ08520

## INDIVIDUAL FINANCIAL ARRANGEMENTS APPLICATION

Financial Secretary: financialsecretary@bethel.net Phone: 609 443-4454 FAX: 609 443-2887

We strive to make the Financial Arrangements process    •DIGNIFIED    •CONFIDENTIAL    •EXPEDIENT

Household Information			
Last Name (_____)	First Name(s) (_____)	Street Address _____	
Phone Number _____	City	State	Zip
Email(s) _____			

Please list ALL names of individuals other than head(s) of households (above) – adults and children – residing in household.			
Last Name	First Name	Birth Date	Relationship

**Unusual Circumstances:** Please check all that apply

- |                       |                       |  |                         |   |
|-----------------------|-----------------------|--|-------------------------|---|
| Change in work status | Child support/custody | Change in marital status (separation or divorce) | High debt<br>Bankruptcy | Excessive expenses (medical, dental, college) |
|-----------------------|-----------------------|--|-------------------------|---|

Please use the space to explain your current situation further:

---



---



---

**Financial Disclosure**

(Beth El reserves the right to ask for additional information to make a determination about this request for assistance.)

Please indicate the **TOTAL** amount you can commit towards payments for the coming fiscal year: \$ \_\_\_\_\_

Please estimate the total combined pretax household income for the coming fiscal year:

Income 1st Adult		Income 2 <sup>nd</sup> Adult	
_____	_____	_____	_____
Employer or Source of Income	How long?	Employer or Source of Income	How long?
_____	_____	_____	_____
Occupation		Occupation	
Current Salary: \$ _____ Est. Next Year Salary: \$ _____		Current Salary: \$ _____ Est. Next Year Salary: \$ _____	

I/We affirm that all information contained in this request for financial assistance is complete and accurate.

Signature(s) \_\_\_\_\_ Date \_\_\_\_\_

Financial Assistance applicants commit to provide ongoing volunteer service to the congregation. So that we may best utilize your skills, please list the types of activities you propose:

---

---

---

We always strive toward improvement. If you have suggestions about the financial assistance process or have other suggestions that can help Beth El, please provide them below:

---

---

---

**We value your participation in the Beth El community.**

**Thank you for the trust you have invested in us.**