



PO Box 41384
Baton Rouge, LA 70806

Islamic Center Of Baton Rouge

ESTABLISHING A MUSLIM COMMUNITY IN LOUISIANA
WWW.ICBRSITE.ORG

Ansaar Committee Financial Aid Application

IMPORTANT: Sanction of aid subject to availability of funds/resources.

A. Type of Aid Sought (circle one): Monetary Help Employment (Job) Utilities Rent Other

If "Other" please explain. _____

Briefly describe your need: _____

B. Personal Information

1) Name: _____

2) Address: _____

3) Home Phone: (____) ____-____-____ Work Phone: (____) ____-____-____ E-mail: _____

4) Marital Status (Circle One): Single Married Widow/Widower Divorced/Separated

5) How many children do you have: _____ Amount of child support received: \$ _____

Children's names and ages: (if more space needed use other side)

C. Financial Information

1) Do you have a Job: Yes No Monthly Salary: _____ Employer Phone#: _____

Name of Employer: _____

Address: _____

Job Description: _____

2) Monthly Rent: \$ _____ 3) Bank Balance: \$ _____ 4) Amount of food stamps received: \$ _____

5) Contribution from working children: \$ _____ 6) Any other financial help: \$ _____

7) With whom do you share household expenses?

Comments: (Use back of form for additional space)

Received by (Ansaar Committee member name): _____ Date: _____