



FAMILY SUPPORT APPLICATION:

(Use this form if you need support due to financial situations caused by DEATH, ILLNESS and UNFORESEEN EVENTS SUCH AS ACCIDENT, FIRE, etc)

APPLICANT INFORMATION (member who is applying to support a family or an individual):

Applicant Name:	Phone No:
Address:	Email:
Type of Support (mark with a X)	Individual <input type="checkbox"/> Family <input type="checkbox"/> Personal <input type="checkbox"/>

SUPPORTED FAMILY OR INDIVIDUAL INFORMATION (no need to complete, if personal):

Names:	Phone No:
	Email:
	Address:
	Email:
Why is the support needed?	

PROVIDE A COPY OF THE FOLLOWING DOCUMENTS WITH YOUR APPLICATION:

- 1- Cover letter: it should explain the reasons of the need of the support
 - Cover letter should contain a minimum of three paragraph and no more than two pages
 - Cover letter should list all volunteer experience with your community
 - Cover letter should list all volunteer experience of you and your family with the Cuban Community
 - Cover letter should list participation in the Community events
 - Cover letter should explain the reasons of the need for support
- 2- Proof of support needs

Only members can apply for this support for themselves or on behalf of others, example: new to the country family. Applicant needs to be member of FCA for at least 3 months before applying.

NOTE: FCA Inc. has limited funds. Funds are distributed until run out. We encourage you to apply again next year if you are not successful.

Date: _____ Signed: _____