



Manitoba Islamic Association - Financial Assistance Application

2445 Waverly St. - Winnipeg, MB - R3Y 1S3 - (204)256-1347 ext. 229

Last Name, First Name (Please print in capital letters)

Date

Driver's License #

Legal Status: Citizen Permanent Resident

Other (Explain):

Contact Information:

Employment Information:

()

()

Home Phone

Work Phone

Name of Company

Job Title

Home Address

Company Address

City

Province

Postal Code

Marital Status

Mosque Attended

Additional Members of Household (Include adults living in the house)

| Name | Relationship | Age (if over 17, please include income) |
|------|--------------|---|
| | Spouse | |
| | | |
| | | |
| | | |
| | | |
| | | |

Financial Information

| Monthly Gross Income | | Monthly Expenses | | Assets | |
|----------------------|--------|------------------|--------|-----------------|--------|
| Source | Amount | Item | Amount | Item | Amount |
| Work | | Rent/Mortgage | | Chequing | |
| Disability | | Utilities | | Savings | |
| Child Support | | Phone | | RRSP | |
| Govt. Support | | Car Ins. | | Pension Fund | |
| Spouse Income | | Food | | Stocks/Bonds | |
| Other Mosques | | Transportation | | Property Equity | |
| Charity Org. | | Medical | | Other | |
| Other | | Credit Cards | | | |
| | | Other | | | |
| Total: | | Total: | | Total: | |

Financial Assistance Request

Please list bills/other expenses with amounts which will be paid from Takaful funds:

If more space needed, use back of form

Have you or your family member received or applied to MIA Takaful or other source for financial assistance? Yes No
If yes, please list each source and amount:

For Official Use Only

Date Received: _____ New? _____ Repeat? _____ Decision: Approved Deferred Denied

Amount: _____ Initials: _____

Notes: _____

References

*Must be familiar with applicant's situation (References will be preferred if known to the Muslim Community).

Name:

Phone:

Name:

Phone:

Please carefully read the following before signing

Applicant accepts and testifies to the following:

1. MIA Takaful Fund Committee has permission to verify information provided by the applicant from appropriate sources.
2. Applicant has provided true and complete information to the best of his/her knowledge and may be disqualified for assistance if he/she knowingly provides false information on the application.
3. Applicant may be required to present all supporting documents, CRA filings, and/or letter of "Future Planning" upon request.
4. Applicant will not submit original bills or documents (Only photo copies please).
5. Application is accompanied by a **copy of applicant's driver's license** or other photo ID with current address and **Manitoba Health Card**. Incomplete applications may be declined or deferred.
6. MIA Takaful Fund Committee will put forth its greatest efforts to provide the best possible assistance based on individual's circumstances. Interfering factors include Zakah regulatory constraints, limited or unavailable funds. The decision made by the Takaful Committee will be final and it will not be provided in writing.
7. The requested assistance will be in the form of Takaful cheque, food certificates, counseling, and/or referrals to government funded programs depending upon applicant's circumstances.
8. Applicant is responsible for reporting Takaful assistance to the CRA and other government agencies.
9. The Takaful Fund Committee may take up to 15 business days for processing and approval.
(may take longer)
10. This application is valid for six months only, after which applicant may reapply if hardships persist.
11. All information and documents provided will be kept in the records for as long as the MIA Takaful Fund Committee see necessary.
12. Applicant acknowledges that he/she stands before Allah (SWT) in truth and Allah (SWT) is his/her witness.

"O you who believe! Fear Allah (SWT) and be with those who are true (in words and deeds)." (9:119)

Signature: _____ Date: _____