



Financial Assistance (Takaful) Application Form

Please write legibly and neatly within the boxes

Manitoba Islamic Association
2445 Waverley St.
Winnipeg, MB R3Y 1S3
Ph: 204-256-1347
www.miaonline.org

Please fill out all 3 pages, and submit all required documents with your application

Applicant Information

First Name Last Name

Date
MONTH DAY YEAR DRIVER'S LICENSE #

Legal Status CITIZEN
 PERMANENT RESIDENT
 OTHER

If legal status is "other", please explain:

Marital Status Mosque Attended

Contact Information

Home Phone Work Phone

Cell Phone Email

Home Address

HOUSE # STREET NAME UNIT # CITY POSTAL CODE

Employment Information

Name of Company Job Title

Company Address

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

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

*If age is over 17, please include income

| Name | Relationship | Age |
|------|--------------|-----|
| | | |
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| | | |
| | | |

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:

| Source | Amount |
|--------|--------|
| | |
| | |
| | |
| | |

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:

| Source | Amount |
|--------|--------|
| | |
| | |
| | |

References

| Name | Phone |
|------|-------|
| | |
| | |
| | |

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

Applicant accepts and testifies to the following: (Please read carefully before signing)

- MIA Takaful Fund Committee has permission to verify information provided by the applicant from appropriate sources.
- 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.
- Applicant will be required to present all supporting documents, CRA filings, and/or letter of "Future Planning" upon request.
- Applicant will not submit original bills or documents (Only photo copies please).
- 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.
- 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.
- 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.
- Applicant is responsible for reporting Takaful assistance to the CRA and other government agencies.
- The Takaful Fund Committee may take up to 15 business days for processing and approval. (may take longer)
- This application is valid for six months only, after which applicant may reapply if hardships persist.
- All information and documents provided will be kept in the records for as long as the MIA Takaful Fund Committee deems necessary.
- 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

OFFICE USE ONLY

Date Received New Repeat **Decision** Approved Deferred Denied

Amount

Initials

Notes: