



APPLICATION FOR SUNSHINE FUND

The Sunshine Fund is designed to help people supported by Progress with unforeseen, extraordinary or emergency expenses for which money is not available. Examples of how money from the Sunshine Fund may be used: non-covered medical expenses, costs incurred in helping individuals stay connected to their families, unanticipated household needs and for occasional special event expenses which bring happiness and joy to their lives, such as camp.

As funds are limited, special consideration will be given to those who make an effort to cover a portion of the total expense themselves. It is also expected that applicants will have pursued other sources for assistance. Please complete the application and return it to receptionist. The committee meets the first week of each month. You will be notified of the committee decision.

Please PRINT legibly.

Person needing financial assistance: _____ Date of Request: _____

Person completing application: _____ Your daytime phone number: _____

Total Cost: _____ Amount of money requested: _____ Date money needed by: _____

Purpose of funds requested : _____

What other sources of funding have been explored by Circle of Support? (Examples: FSC Funds, Family, Conservator...) _____

Repayment Options? _____

Any other relevant information for consideration: _____

Date Received: _____ Meeting Date: _____

				<i>Signature</i>
Committee Vote:	Pam Fanning	YES	NO	_____
	Evalyn Franzone	YES	NO	_____
	Levi Griego	YES	NO	_____
	Carolyn Huey	YES	NO	_____
	Susan Jakoblew, Chair	YES	NO	_____
	Donna Morin	YES	NO	_____
	Vicky Rager	YES	NO	_____
	Donna Reece	YES	NO	_____

If denied, reason: _____

Recommendation to COS, if any: _____

Committee Decision: YES NO Amount approved: _____ Check Request submitted on: _____

Committee Chair Signature _____ Executive Director's Approval: _____