

MINTURN COMMUNITY FUND

Minturn Matters

NEIGHBORS IN NEED APPLICATION FORM 2021

The Minturn Community Fund's "Neighbors in Need" (NIN) program is designed to assist Minturn residents who are suffering real, immediate and quantifiable problems in their life. This program is intended to provide temporary relief and should not be considered a long-term commitment by the MCF. Please provide the following information either for yourself, or for a neighbor who you are advocating on behalf of.

Please attach any documentation that would provide context to your issue. All information within this application is confidential and should be returned to the MCF via e-mail at info@minturncommunityfund.org or directly to a board member of the MCF. You can also mail your application to: MCF NIN PO Box 277, Minturn, 81645-0227

Date:

Name of Applicant:

Age:

E-mail:

Phone:

Physical Address of Applicant:

Mailing Address of Applicant:

Name of *Advocate* if applying on Applicant's behalf:

Advocate's E-mail:

Advocate's Phone:

Minturn Community Fund
Neighbors in Need Application

Please completely answer the following narrative questions. If more space is necessary, please attach any further documentation in support of your application.

Please describe the nature of the issue:

Please describe in detail any other support you/your neighbor have/has received, or will be receiving regarding this issue:

Please describe in detail the support you/your neighbor are seeking from the Minturn Community Fund:

Minturn Community Fund
Neighbors in Need Application

I certify that all information I have provided the Minturn Community Fund is accurate to the best of my knowledge. I further certify that I have read and understood all terms, conditions and policies associated with the Neighbors in Need program and will comply with all terms and conditions fully. I understand that failure to provide accurate information or failure to comply fully with all terms and conditions may require me to reimburse the Minturn Community Fund for any and all monies awarded.

Signature of Applicant (or *Advocate* applying on behalf of Applicant)

Date