


**NOTICE:**

1. TO BE CONSIDERED FOR ASSISTANCE FROM THE FUND, YOU MUST ANSWER ALL QUESTIONS AND COMPLETE ALL SECTIONS OF THIS APPLICATION FORM. PLACE "N/A" IN SECTIONS THAT ARE NOT APPLICABLE.
2. IF YOU HAVE ANY QUESTIONS, CONTACT PASTOR BRAD HOPPER, MATTHEWS UNITED METHODIST CHURCH, 704.847.6261.OR BRAD@MATTHEWSUMC.ORG.

<h1 style="margin: 0;">Application for Assistance</h1>		 <h2 style="margin: 0; color: #0070C0;">The Becky Nelson New Beginnings Fund</h2>		
First Name	Middle Initial/Name	Last Name	Suffix	
Address (Street number and name)		City	State	
Home Phone	Message/Cellular Phone	Date of Birth	<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	
<b>E-mail Address</b>				
<b>Referral Source</b> How did you find out about or were referred to the Fund?				
<b>Availability</b> What days/hours are you available to meet with the Fund advisory board about your application? MONDAY _____ WEDNESDAY _____ FRIDAY _____ SUNDAY _____ TUESDAY _____ THURSDAY _____ SATURDAY _____				
<b>Education</b> Circle highest grade completed: 1 2 3 4 5 6 7 8 9 10 11 12 GED    College 1 2 3 4    Graduate School 1 2 3 4				
Schools	Name and Location	Dates Attended (mo/yr) From:    To:	Grad? YES NO	Comments
High School			YES NO	
College(s) University (s)			YES NO	
Other educational, vocational school, internships, etc.			YES NO	
<b>Family</b> How many people live in your household? _____ Are you head of household?    Yes    No    Comments: _____ What are the ages of your dependent children? _____				
<b>Note: Answering YES to the below questions does not automatically disqualify you for assistance.</b> Are you legally authorized to live/ work in the United States? <input type="checkbox"/> YES <input type="checkbox"/> NO Have you ever pled "guilty" or "no contest" to a crime or been convicted? <input type="checkbox"/> YES <input type="checkbox"/> NO If YES, give date and details: _____				
<b>List three personal references not related to you.</b> NAME: _____ RELATIONSHIP: _____ PHONE: _____ NAME: _____ RELATIONSHIP: _____ PHONE: _____ NAME: _____ RELATIONSHIP: _____ PHONE: _____				
<b>Motor Vehicle Record</b> Do you have a current valid driver's license? <input type="checkbox"/> YES <input type="checkbox"/> NO    License No. _____ State: _____ Exp. Date: _____ Have you ever been convicted of a DUI or DWI? <input type="checkbox"/> YES <input type="checkbox"/> NO    If YES, Date: _____				

**Background**

Briefly tell us about the situation in which you find yourself needing assistance and how you got there?

**Goals**

What are your short-term and long-term goals and dreams?

**Assistance**

What assistance are you requesting from the Fund

**WORK HISTORY** (Include Volunteer Experience) Use Additional Sheets if Necessary

<b>Current or Last Employer:</b>				Address:		
Job Title:		Supervisor's Name		Telephone Number		No. Supervised By You?
Start Date:	Starting Salary:	Ending or Current Salary:	Reason for Leaving:		Number hours per Week	
End Date:	\$ per	\$ per			Worked:	
Duties and Responsibilities:						
<b>Employer:</b>				Address:		
Job Title:		Supervisor's Name		Telephone Number		No. Supervised By You?
Start Date:	Starting Salary:	Ending or Current Salary:	Reason for Leaving:		Number hours per Week	
End Date:	\$ per	\$ per			Worked:	
Duties and Responsibilities:						
<b>Employer:</b>				Address:		
Job Title:		Supervisor's Name		Telephone Number		No. Supervised By You?
Start Date:	Starting Salary:	Ending or Current Salary:	Reason for Leaving:		Number hours per Week	
End Date:	\$ per	\$ per			Worked:	
Duties and Responsibilities:						

Check all that apply to you.

- Starting over.
- Learning a new skill.
- Commencing or launching a new endeavor.
- Willing to make the changes necessary to realize the dream.
- Opening a new direction or avenue. Changing my life.
- Entering an area of education, service, or employment that will help others.
- Restricted in other places or resources to turn.
- Receiving mentorship or counseling or willing to receive mentoring or counseling.
- On a God-honoring journey with a desire to further my gifts and talents given me.
- Willing to share my resources (financial, mentoring, or encouragement) with others in similar situations once situation is stabilized.

What else would you like for us to know about you and your journey to a New Beginning?

Expectations:

The BNNB Fund is modeled after the **Parable of the Talents** in Matthew 25:14-30 NIV, which reads:

<sup>14</sup>“Again, it will be like a man going on a journey, who called his servants and entrusted his property to them. <sup>15</sup>To one he gave five talents of money, to another two talents, and to another one talent, each according to his ability. Then he went on his journey. <sup>16</sup>The man who had received the five talents went at once and put his money to work and gained five more. <sup>17</sup>So also, the one with the two talents gained two more. <sup>18</sup>But the man who had received the one talent went off, dug a hole in the ground, and hid his master’s money.

<sup>19</sup>“After a long time the master of those servants returned and settled accounts with them. <sup>20</sup>The man who had received the five talents brought the other five. ‘Master,’ he said, ‘you entrusted me with five talents. See, I have gained five more.’

<sup>21</sup>“His master replied, ‘Well done, good and faithful servant! You have been faithful with a few things; I will put you in charge of many things. Come and share your master’s happiness!’

<sup>22</sup>“The man with the two talents also came. ‘Master,’ he said, ‘you entrusted me with two talents; see, I have gained two more.’

<sup>23</sup>“His master replied, ‘Well done, good and faithful servant! You have been faithful with a few things; I will put you in charge of many things. Come and share your master’s happiness!’

<sup>24</sup>“Then the man who had received the one talent came. ‘Master,’ he said, ‘I knew that you are a hard man, harvesting where you have not sown and gathering where you have not scattered seed. <sup>25</sup>So I was afraid and went out and hid your talent in the ground. See, here is what belongs to you.’

<sup>26</sup>“His master replied, ‘You wicked, lazy servant! So you knew that I harvest where I have not sown and gather where I have not scattered seed? <sup>27</sup>Well then, you should have put my money on deposit with the bankers, so that when I returned I would have received it back with interest.’

<sup>28</sup>“Take the talent from him and give it to the one who has the ten talents. <sup>29</sup>For everyone who has will be given more, and he will have an abundance. Whoever does not have, even what he has will be taken from him. <sup>30</sup>And throw that worthless servant outside, into the darkness, where there will be weeping and gnashing of teeth.’

If the BNNB Fund should elect to provide assistance to you in some form, how would you propose to repay the funding and how much time would you require (zero-interest loan)?

If you are willing to share you resources with others in similar situations, pleas explain how you would propose to do so.

**Referral:**

If an individual or agency to Becky Nelson New Beginnings is referring you, please have the individual or agency representative complete this portion of the application.

Name of individual/representative: \_\_\_\_\_

How you know the person completing this application (relationship): \_\_\_\_\_

Please indicate why you believe this individual making the application should be considered by BNNB for a zero interest loan.

- I certify that all information I have provided in this application is true and correct to the best of my knowledge.
- I understand that the Fund advisory board may require additional information and that I will be subject to a background check, credit check, and other workplace/personality profile.
- I authorize the BNNB Fund to use my story in helping others. I understand that I will be contacted and asked for additional verbal authorization if my name is used in helping BNNB tell its story.

APPLICANT SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_