

Kansas Veterans of Foreign Wars

Application for Assistance

Date: _____

Referred by: _____

Veteran's Name: _____

Complete Address: _____

Phone #: _____ Social Security #: _____

Monthly Income: \$ _____ Total Monthly House Hold Income: \$ _____

Member of: () VFW Post # _____ () American Legion () AmVets () Other _____

Branch of Service: () Army () Navy () Marine Corps () Air Force () Coast Guard

Service Number: _____ Dates of Service: _____

Person Filling out Application (if different from above) _____

City, State, Zip _____

Phone # _____ Relationship to Veteran _____

Amount of Funds Requested: \$ _____ (attach copies of eviction or disconnect notice with application for rent or utility assistance. For car repair an appraisal from a mechanic/garage and proof this is your only mode of transportation to and from work).

INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED

Attach a separate sheet to this page describing the need for assistance, to include:

1. Statement of problem.
2. Possible solutions to the problem.
3. How VFW Assistance funds will help solve the problem.
4. Other sources of assistance that have been contacted.
5. Other sources of assistance that have been received toward the solution of this problem.
6. If this application is not approved, what will be the consequences?
7. Include proof of eligibility, i.e. discharge papers and proof of Kansas residency.
8. Include copies of eviction or disconnect notice and/or supporting documents.
9. ***Must have an Honorable Discharge***

Mail the Completed Application to: Kansas VFW Headquarters, P.O. Box 1008 Topeka, Kansas 66601-1008

Mark the envelope CONFIDENTIAL

***I have read the guidelines for compensation and accept those conditions**

Applicants Signature

APPLICATIONS MUST BE MAILED! WE WILL NOT ACCEPT HAND DELIVERED APPLICATIONS!

CHECKS WILL BE MADE TO CREDITORS ONLY

GUIDELINES FOR THE KANSAS VETERANS OF FOREIGN WARS ASSISTANCE FUND

The Kansas Veterans of Foreign Wars Assistance Fund is established to provide financial assistance to worthy Kansas Veterans of the United States Armed Forces who have insufficient financial resources to meet a critical or emergency need for shelter, utilities, or vehicle repair.

Any veteran whom proves Kansas residency and is an honorably discharged veteran of the armed forces of the United States is eligible to apply for financial assistance from the Kansas Veterans Assistance Fund.

Application Procedure: Any eligible person (or someone on behalf of an eligible person) may apply for a grant of funds under this program. Application forms are available from the Kansas Veterans of Foreign Wars Headquarters and may be requested/obtained by calling phone: 785-272-6463.

Completed applications are to be forwarded by U.S. Mail to Kansas Veterans of Foreign Wars, PO Box 1008, Topeka, Kansas 66601-1008 or email only ksvfwHQ@kvfw.kscoxmail.com

(1) **Use of Grant Fund:** Grants will be made to eligible person for the purpose of meeting an essential basic need for shelter (with eviction notice), utilities with disconnect notice or vehicle repair appraisal. Grants will not be made for items that are discretionary or nonessential in nature ("wants")

(2) **Limitations:** Grant application will not be approved for more than \$500.00

(3) Grants will usually not be approved for the same veteran more than once in a life time.

(4) Grants will not be approved to help an eligible person on a continuing basis, e.g., rents, utilities, car repairs and see item (3)

The Fund is unable to assume the total responsibility for a veteran's bill or bills due to the cap listed in item (2).

Proof of Eligibility: The burden of proof of eligibility of the applicant for assistance from the Fund shall rest upon the applicant. Military discharge papers generally provide sufficient documentation. (DD-214)