



Christmas Hamper Application Package

Applications due by:

Friday December 1st, 2017 by 4:00pm

They will be dated and time stamped

Late applications will not be accepted

Hamper checklist:

- Application signed and dated? (3 pages including cover page)
- Application handed in by due date?
- Confirmation of income submitted?
- Phone number where you can be reached?

**** NOTE: OW & ODSP recipients are eligible and are required to provide proof of income.**

Christmas hampers are for status Curve Lake First Nation Members who reside on Curve Lake First Nation.

Please contact the Health Centre for any questions 705-657-2557

Household Request for a Christmas Food Hamper

Mailing Address:

Householder making request:

Phone Number: _____

Name and age of other residents living in the household:

<u>All residents over the age of 18 living in the household</u>			<u>All Residents under the age of 18 living in the household</u>		
Name:	Age:	Male/Female	Name:	Age:	Male/Female

Income verification must be included with this request.

If there is any question about the information contained in this document, I agree to have a Curve Lake Staff member follow-up with myself, others in the household or those who may provide income as listed on page 2.

If any information is found to be inaccurate or missing, I understand my request will be denied.

Signature of Householder Making the Request

Date: _____

**Please return this application by 4pm on Friday December 1st to:
Curve Lake Health Centre, Curve Lake, Ontario, K0L 1R0**

Applicant and House Residents Income:
(for the month of October or November Only)

	#1	#2	#3	#4	#5
Hourly Wages					
Monthly Salary					
Ontario Works					
O.D.S.P					
Employment Disability					
Employment Insurance					
Old Age Pension					
Canada Pension					
Other Pension					
Rental/Board Income					
Lease Income					
Investment Income					
Other Income					
Individual Totals					

October or November's grand total income of all income: \$ _____.

<p>For office use only:</p> <p>Eligibility met and qualifies for Christmas Hamper: _____ OW: _____ ODSP: _____</p> <p>Eligibility not met and does not qualify for Christmas Hamper: _____</p>
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