



## Cares Program Application

### Applicant Information

Name:		
Date of birth:	Home Phone:	Mobile Phone:
Current address:		
City:	State:	ZIP Code:
Age of Home:	Number of Years in Home:	Email Address:
Home Type (Single Family, Town House):	Have you had any work done by Michael & Son before:	
Number of Children or Elderly In the Home:	Number of Floors:	Number of Bedrooms:

### Employment Information

If Not Employed Skip to Next Section.		
Current employer:		
Employer address:	How long?	
Phone:	E-mail:	Fax:
City:	State:	ZIP Code:
Position:	Hourly    Salary    (Please circle)	

Reason For Unemployment:

Have you or Are You Currently Receiving Assistance From any Other Organizations:

### Necessary work that needs to be done

Using the most possible detail, describe the type of service you need assistance with (Electric, HVAC, Plumbing)

List any estimates you were given for the repair and who gave the estimate?

### Family History

List disabilities or illnesses of applicant or family members:

Describe using most possible detail the types of hardships your family has experienced and why you qualify for The Cares Program:

### Disclaimer

The Michael & Son Cares Program does not provide any sort of final assistance. Applications may take up to 3 weeks to be processed. Completed applications must also include a signed filming release. Applications without a signed filming release will not be reviewed. Completing this application does not mean you have been approved for assistance. Applicants are selected based on urgency of need and availability of materials, labor and time. The collection of this information is solely for the use of the Cares Program. Your personal information will not be shared with any other party. We reserve the right to refuse any application or terminate work being done at any time.

Signature of applicant:	Date:
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