



(424) 571-2196
 EFund@VillageforVets.org
 www.villageforvets.org/efund

Veterans Emergency Fund Application

ALL REQUIRED INFORMATION MUST BE SENT WITH THIS APPLICATION – FAILURE TO DO SO
 MAY RESULT IN DELAY AND POSSIBLE DENIAL OF THE APPLICATION FOR ASSISTANCE

Date _____
 Case Manager _____
 Program/Org _____

Phone _____
 Email _____
 How long have you worked with Vet? _____

Please read this form carefully, fill it out completely, and email it with required documents to efund@villageforvets.org

Veteran's Name	
Veteran's Age	
Veteran's Address	
Veteran's Phone Number	
Veteran's Email Address	
Branch of Service	
Is the Veteran a member of the American Legion? If so, which post?	
Ethnicity:	Hispanic or Latino Non-Hispanic or Latino
Race:	American Indian or Alaska Native Asian Black or African American Native Hawaiian or Pacific Islander White (Caucasian) Other
Gender:	Male Non-Binary Female Prefer not to say
Is the Veteran a member of the LGBTQIA+ community	Yes Prefer not to say No
Annual Income (include military, social security, and other social services benefits i.e., general relief)	
Household Composition (family members in household)	

Is the Veteran employed? If so, please complete the following:	Monthly income: Employer Name: Job Title: Length of Employment:
Is the Veteran Enrolled in VASH? If so, please provide case manager contact information.	Yes No Contact:
Is the Veteran enrolled in SSVF? If so, please provide case manager contact information.	Yes No Contact:
Is the Veteran able to pay anything towards the total money requested? If so, how much?	Yes No Amount:
If the Veteran has a spouse or significant other that is the primary account holder on any bills, please give that person's name and the last 4 digits of their SSN.	Yes No SSN:

Type of Assistance Needed:

- **Rental/Mortgage Assistance**
 - Does the Veteran qualify for SSVF Homeless Prevention Funds? If not, please include denial letter
- **Utilities (*Attach all utility bills you are requesting assistance for*)**
 - Did the Veteran try other utility assistance programs such as HEAP? If so, please include denial letter
- **Other (*Attach estimate or invoice from vendor*)**
 - Please note for car repairs the Veteran must provide three estimates from reputable businesses and the repairs must only include what is necessary to have the vehicle run safely. No cosmetic requests will be approved.

Required Documentation:

- **Letter from you**, the referring agent/case manager, on agency letter head that includes the reason(s) the Veteran needs help. The letter must contain the Veterans name, address, phone number, details related to the Veteran's military service, and why this assistance is needed.
- **DD214, VA ID, or letter verifying veteran status** if not referred directly from a VA employee.
- **If requesting rent assistance:** Landlord information – include name, address, phone number – be certain the “payable to” information is correct. First and last page of the lease, or evection notice is required. If landlord is not incorporated, a completed W-9 form is required.
- **If requesting other vendor or utility payment assistance:** The actual invoice (computer printouts are not acceptable) and a W-9 completed by the vendor. If vendor is a corporation, W-9 is not needed.

Requested Further Documentation:

- **Letter and photo of the Veteran** describing their current situation and how this assistance will positively help them. The photo should NOT be an ID picture, we are requesting an actual photo of the Veteran. If the Veteran agrees the send us a picture, please have the Veteran complete a consent and release form.