

Date: \_\_\_\_\_

Name of Person(s) Requesting (please print): \_\_\_\_\_

Current Phone:: \_\_\_\_\_

Email (please print): \_\_\_\_\_

Current RCS Family       Incoming RCS Family       Current Employee

Please list the current grades of dependent children enrolled at RCS \_\_\_\_\_

Please describe any concerns that may be shared by administration (i.e. academic probation, student behavior issues, employee performance issues, etc). \_\_\_\_\_

Have you applied for assistance via FAST?  Yes  No

Have you ever been granted financial assistance/benevolence from RCS?  Yes  No

What church is your family actively involved with? \_\_\_\_\_

Type of Need Requested (please print): \_\_\_\_\_

Length of time assistance is needed: \_\_\_\_\_

Reason for Request (please print): \_\_\_\_\_

\*\*\*My signature below guarantees the information provided above is accurate and true. I understand that benevolence is provided for a limited period of time to assist RCS families through a temporary, unexpected financial hardship. RCS is required to process benevolence assistance as additional income for employees that are granted assistance. I understand that the granting of benevolence is up to the sole discretion of the benevolence committee.

Signature / Date

Describe any assistance provided: \_\_\_\_\_

\_\_\_\_\_

List any provisional requirements: \_\_\_\_\_

\_\_\_\_\_

If assistance is denied, please explain rationale: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Head of School approval: \_\_\_\_\_

Notes: