

ICO ZAKAH APPLICATION

Financial Assistance Form

Incomplete/ineligible forms will not be processed. Kindly allow a minimum of 7 days for a response.

Personal Information												
Name:				Gender:				Dat	Date of Birth:			
Phone: Email:				Drivers License/ID #:								
Address:												
Have you applied to ICO for Zakah in the past 6 months? ☐ No ☐ Yes (Denied) ☐ Yes												
Date Applied:					Amount Received:							
Legal Status: □ US Citizen □ Green Card holder Other:												
Marital Status: □ Married □ S			ingle		□ Separated			□ Div	orced	□ Widow		
Family and Dependent Information (Includes Spouse and Children)												
No.	Name			Relatio	nship to	nship to you		Gender	Income	(If applicable)		
1.												
2.												
3.												
4.												
5.												
6.												
Financial Information												
Income			Amount		Expenses					Amount		
Employment Salary (Attach a copy of last 3 paychecks)			\$		Housing: Monthly Rent / Payment (Attach Canceled Check/Money Order)					\$		
Savings (Cash & in bank accounts)			\$		Automobile Monthly Payment:					\$		
Social Security Income (SSI)			\$		Automobile Monthly Insurance:					\$		
Food stamps			\$		Utiliti	es: (El	\$					
Child Support			\$		Medical Bills:					\$		
Unemployment			\$		Groceries/Food:					\$		
Family/other Zakah support			\$		Debts: (Provide details at the end)					\$		
Other:			\$		Othe	r:				\$		
Total			\$		Total					\$		

Employment Details:										
□ Unemploy	n:									
Employer Na	ıme:		Phone:		Email:	· Email:				
Assets:										
Type of Asset: (Please Explain) Total Value:										
Jewelry: (Specify each item along with its weight individually)										
Jewelly. (Opecity each item along with its weight individually)										
Stock and/or other investments:										
Property (excluding the personal residence):										
Debts owed	Debts owed to applicant:									
Items not regarded as necessities (televisions, game consoles, and others)										
Zakah Needs										
Rent:	\$	Food:	\$	Medical:	\$	Other:	\$			
Total Requested: \$										
Document Checklist: Please provide the following: 1. Drivers License/ID 2. Copy of the 1st page of your previous year's tax returns (State/Federal) 3. Proof of residence (Recent utility bill, lease agreement, or mortgage statement) 4. Last 3 paychecks received 5. Canceled Check/Money order for rent/housing 6. Last 3 months' bank statements										
Acknowledgment Statement:										
hereby testify in the name of Allah Ta'ala and accept the following: 1. All the information/documents provided are genuine and authentic to the best of my knowledge. 2. ICO may verify ALL information contained in this application from the appropriate sources. 3. I will notify ICO if any changes occur that disqualify me from being an eligible recipient of Zakah. 4. I accept I do not possess any surplus assets (over my necessities which can fully settle my expenses/debts) 5. If I knowingly give false/misleading information I may be disqualified from requested assistance. 6. I authorize ICO to share all pertinent information with other organizations as needed. 7. ICO has the sole right to grant or refuse assistance at its discretion. 8. I am an eligible recipient of zakah according to Shari'ah.										
Signature:				Date	:					
For Offical Use Only: □ Unapproved □ Approved Amount Approved: \$ Duration:										
Date:	Sig	gnature:		P	rint Name:					