**SPECIAL CASE FORM**

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| --- | --- | --- | --- | --- |
| **Case Worker:** | | **Date:** | | |
| **Friend’s Name:** | | **Phone:** | | |
| **Number of Children:** | **Ages:** | | **Number in Household:** |

**To Qualify:** This is intended for emergency assistance, not for chronic situations. **Must be used for all Rental** assistance and **Other**. Utilities may also be paid from a combination of Utilities and Fernandez Fund NTE maximums.

* The primary priority for all assistance will be families with children. Also, consideration will be given to the elderly, the disabled or a person who has a serious illness.
* The case must be reviewed by the SC Committee either at a meeting or via email vote and determined by vote to approve or decline.

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| 1. **TYPE OF ASSISTANCE REQUESTED:** Rent  Utilities  Other: |

1. **NOTE:** IF utility company is SW GAS and payment is due with a disconnect notice, give Friend the SW GAS grant application. Do not use this Form.
2. **RENTAL LEASE/UTILITY BILL/OTHER SHOULD BE IN FRIEND’S NAME: Verified** If not, explain who and why.
3. A brief description of the problem – what happened that the friend can’t pay this month

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1. I have discussed with the FRIEND his/her plan for next month’s rent, utilities, other payments*:*
2. If the friend has an EVICTION NOTICE, have they tried to contact SEACAP? Yes  No  N/A
3. The *Vincentian* has contacted the Prop Mgr. / Landlord, Utility Company, and if other called to get another estimate:

|  |  |  |  |
| --- | --- | --- | --- |
| Yes  No  Name: | | Phone: | |
| **Total Amount Due**: | Due Date: | |

1. How much can the Friend or family member contribute?
2. Will Landlord/Prop Mgr/Utility Company, Other work with Friend? Yes  No

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| If yes, explain here |

**CASE FILE UPDATED**

1. **A motion** must be made by the Caseworker, **discussed** **with and seconded** by another caseworker working that day.
2. Ask Blanca to send Friend’s file and this form to the SC Committee:

|  |  |
| --- | --- |
| **Actual Amount Needed**: | **Suggested Funds**: |
| **Motion:** | **Second by:** |

1. Case e-mailed? \_\_\_\_\_\_\_\_\_ Date: ***\_\_\_\_\_\_\_\_\_\_\_\_\_\_***  Time: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***ACTION TAKEN BY SPECIAL CASE COMMITTEE AND FUNDS TO BE USED:***  Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Approved** | **Approved with Stipulations** | | **Declined** | **Amount:** |
| **Funds Category to be used:** | | **Remarks for Case Worker:** | | |

**CASE WORKER: UPDATE CASE FILE**