



The holiday season will be here soon! In Forsyth County, we have a tradition of working together to take care of those in our community. Six years ago, a partnership between the local businesses, non-profit agencies, faith community, and the school system resulted in the The Place Holiday House program.

This year due to Covid the The Place Holiday House format will be a little different. Instead of parents shopping for gifts for their children, we will ask for a wish list for each child and have our volunteers bag the gifts. Once gifts are ready, parents will receive a text message on where and when to pickup toys. We hope to provide assistance to families again this year with the generous support of our faith, business, and school communities.

**Who:** Parents may sign up children who are 0 months (born) - 18 years old (in high school). Families will need to provide the following documentations:

- Picture ID (i.e. driver's license, passport, consulate ID)
- Proof of Forsyth County Residency (i.e. lease, utility bill, vehicle registration, rent receipt)
- Proof of Income for the past 30 days for all individuals living in the household (i.e. paystubs, Social Security Letter, Disability, Food Stamp letter, unemployment letter, TANF, WIC)
- Proof of Guardianship for each child (i.e. Medicaid/Peach Care card, Report Card, Free & Reduced Lunch email, Medicaid or Food Stamp letter with child's name, guardianship papers)

To Apply please complete this application, wish list and submit the required documents-

<https://www.theplaceofforsyth.org>

Click: Qualify

**Where:** Parents will pick up gifts at The Place Holiday House at the Collection at Forsyth, on an assigned date and time in December. ***Due to Covid, we ask that only 1 parent come in to pick up toys. Children three and older will not be allowed.***

\*The program is a community initiative, so there is no guarantee of child/family confidentiality. \*

**For more information or for volunteer opportunities, please visit The Place of Forsyth website at [www.theplaceofforsyth.org](http://www.theplaceofforsyth.org) or contact them at (770) 887-1098.**



# Qualification Application

DUE NOVEMBER 1, 2020

In order to receive assistance from The Place of Forsyth County, you must meet certain requirements. This application will help our office determine what services you qualify for.

Please complete this application packet and return it with all supporting documents, or email it to [documents@theplaceofforsyth.org](mailto:documents@theplaceofforsyth.org) by **November 1, 2020.**

After November 1 you will not be able to receive food from The Place until you complete the qualification process.

## What do I need to qualify? Must apply by 11/1/2020

Must live in Forsyth counties and provide copies of the following information:



Picutre ID (i.e. driver's license, passport, consulate ID)



Proof of Forsyth County Residency (i.e. lease agreement, utility bill, vehicle registration, rent receipt)



Proof of Income for the past 30 days for all individuals living in the household (i.e. paystubs, Social Security Letter, disability, food stamp letter, unemployment letter, TANF, WIC)

Qualification for The Place Holiday House requires the following:



Proof of Guardianship for *each child* (i.e. Medicaid or Peachcare card, report card, free & reduced lunch email, Food Stamp letter with child's name, guardianship papers). Children must be 0 months (born) - 18 (in High School) to qualify for The Place Holiday House.

## Income

How much does your household make every month? Check all that apply and give the amount receive.

Employment \$\_\_\_\_\_ per month

\_\_\_\_\_  
Name of employer

Social Security/Disability \$\_\_\_\_\_ per month

Food Stamps \$\_\_\_\_\_ per month

TANF \$\_\_\_\_\_ per month

WIC \$\_\_\_\_\_ per month

Unemployment \$\_\_\_\_\_ per month

Child Support \$\_\_\_\_\_ per month

TOTAL \$\_\_\_\_\_ per month

## Please Print Clearly

\_\_\_\_\_  
First and Last Name

\_\_\_\_\_  
Preferred Name

\_\_\_\_\_  
Client ID Number from market card if known

\_\_\_\_\_  
Phone Number

I would like to apply for (check all that apply)

Food  The Place Holiday House

The best way to get in touch with me is:

Call  Text  E-mail  Mail

## General Information

If applying for The Place Holiday House, in addition to the requested information on this form, please provide proof of guardianship. See list above for approved documents.

Completed application, Charity Tracker form (both sides), and supporting documents, should be delivered to The Place or emailed to [documents@theplaceofforsyth.org](mailto:documents@theplaceofforsyth.org) by **November 1, 2020.**

Once all documents are received and a decision has been made concerning your qualification application, you will be notified via text/email. Please do not call to inquire. We will contact you.



# Charity Tracker Release of Information

DUE NOVEMBER 1, 2020

Client's Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ MI: \_\_\_\_\_

Address: \_\_\_\_\_ City/State: \_\_\_\_\_ Zip: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ SSN: \_\_\_\_\_ XXX-XX- \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

The United Way of Forsyth County Assistance Network, hereinafter referred to as "CharityTracker", utilizes Charity Tracker, a shared, computerized record keeping system that captures information about people experiencing need for emergency services, including but not limited to assistance with utility bills, medications, rent/mortgage payments, etc. United Way of Forsyth County (Administrating Agency) administers CharityTracker on behalf of participating agencies of the CharityTracker Assistance Network, including **The Place of Forstyh County, Inc.** (Participating Agency).

I understand that all information gathered about me is personal and private and that I do not have to participate in CharityTracker. I have had an opportunity to ask questions about CharityTracker and to review the basic identifying information, which is authorized by this release for the CharityTracker Assistance Network Participating Agencies to share. I also understand that information about non-confidential services provided to me by CharityTracker participating agencies may be shared with other CharityTracker Participating Agencies. This Release of Information will remain in effect for 3 years from the date noted under my signature at the bottom of this page unless I make a formal request to this Organization that I no longer wish to participate in CharityTracker.

Household/Dependents	Relationship	Date of Birth	Age	School
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

I authorize **The Place of Forsyth County, Inc.**, as a CharityTracker Participating Agency, to share my basic, identifying and non-confidential service transactions/information with other CharityTracker Participating Agencies. I authorize the use of a copy of this original to serve as an original for the purposes stated above. I further authorize **The Place of Forsyth County, Inc.** (Participating Agency), as a CharityTracker Participating Agency, to share my dependent's basic, identifying and non-confidential service transactions/information with other CharityTracker participating agencies or refer to other agencies as deemed appropriate.

\_\_\_\_\_  
Client and/or Parent-Legal Guardian's Authorizing  
Signature

\_\_\_\_\_  
Agency Representative Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

Is this your first visit?

- Yes     No

Gender:

- Female     Male

Education:

- High School Incomplete     College  
 Diploma/GED

Ethnicity:

- African American     Pacific Islander     Hispanic     Other: \_\_\_\_\_  
 Middle Eastern     Native American     Caucasian     Asian

Marital Status:

- Married     Divorced     Separated  
 Single     Widow

Employment:

- Full-Time     Part-Time  
 Unemployed

Referred By:

- DFACS     Church     Doctor     Schools     Internet     Family  
 Neighbor     United Way     St. Vin. de Paul     Friend     Avita     Thrift Store  
 Repeat     Other: \_\_\_\_\_

Notes:

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This year due to the COVID-19 pandemic, The Place Holiday House will look different. Parents will not be able to "shop" for their children. Instead, we will try fulfill your wishes as best as we and the community can. Please fill in the information below. NOTE - there is NO guarantee you will get everything on this list. This list will simply be a guide. Children must be 0 months (born) to 18 yrs old (in high school). Bikes will not be available for Hioliday House. We hope to have some in the spring.

If you qualify for The Place Holiday House, you will receive a text message with further instructions and information. Please fill out BOTH sides of this form.

*Este año debido a la pandemia COVID-19, The Place Holiday House se verá diferente. Los padres no podrán "comprar" para sus hijos. En su lugar, intentaremos cumplir sus deseos lo mejor que nosotros y la comunidad podamos. Por favor, rellene la siguiente información. NOTA - no hay garantía de que obtendrá todo en esta lista. Esta lista será simplemente una guía. Los niños deben tener 0 meses (nacidos) a 18 años de edad (en la escuela secundaria). Bicicletas no estarán disponibles para Holiday House. Esperamos tener algunos en la primavera.*

*Si califica para The Place Holiday House, recibirá un mensaje de texto con más instrucciones e información. Por favor, rellene los lados FRONTAL y POSTERIOR de este formulario.*

## Wish List / Lista de Deseos

\_\_\_\_\_

CT ID#	Parent Name / Nombre del Padre	# of Children / Número de Niños
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\_\_\_\_\_

CT ID#	Child's Name / Nombre del Niño	M F / Sexo	Age/Edad
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Something I want most / Algo que más quiero: \_\_\_\_\_

Something I need / Algo que necesito: \_\_\_\_\_

\_\_\_\_\_

Favorite Color / Colo Favorito	Favorite Book / Libro Favorito
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\_\_\_\_\_

Favorite Game / Juego Favorito	Favorite Sport / Deporte Favorito	Favorite Place to Shop / Tienda Favorito
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\_\_\_\_\_

Favorite Restaurant / Restaurante Favorito
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Shoe Size / Tamaño del zapato

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Pants Size / Tamaño de los pantalones

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Shirt Size / Tamaño de la camisa

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Something to Read / Algo que Leer: (book, magazine, comic book / libro, revista, cómic)

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Something to Do / Algo que Hacer: (game, movie, adventure / juego, película, aventura)

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Something for My Family / Algo por mi Familia: (game, movie, adventure / juego, película, aventura)

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Let The Place Holiday House be your school's PURPOSE this Holiday Season.

For more information email: [Naomi@theplaceofforsyth.org](mailto:Naomi@theplaceofforsyth.org)

*Where every Person, Dollar, and Hour has a PURPOSE.*

