

# Sweeny Police Department Operation Blue Santa Application

**APPLICANT MUST LIVE WITHIN THE SWEENEY SCHOOL DISTRICT AREA**  
**DEADLINE FOR SUBMISSION: OCTOBER 28, 2016**

FOR OFFICE USE ONLY

Application Received by \_\_\_\_\_

Date \_\_\_\_\_

Status \_\_\_\_\_

Applicants Name /Spouse \_\_\_\_\_

Physical Address \_\_\_\_\_

Contact Phone Number (2) \_\_\_\_\_

**NAME ON PROOF OF RESIDENCY MUST MATCH THE NAME OF THE APPLICANT**

**ACCEPTABLE FORMS OF RESIDENCY**

- \* Utility Bill    \*Phone Bill    \* Cable Bill    \* Rental/Lease Agreement    \*Property Tax Statement

Other Income Sources: **Annual Income: Copies of these items must be submitted with application**

EMPLOYER & INCOME \_\_\_\_\_

TANF: \_\_\_\_\_

VA: \_\_\_\_\_

SOCIAL SECURITY: \_\_\_\_\_

FOOD STAMPS: \_\_\_\_\_

TOTAL NUMBER OF PERSONS IN HOUSEHOLD: \_\_\_\_\_

Are you in Section 8 Housing? Y N

ANY DISABLED MEMBERS? Y N

MONTHLY RENT: \_\_\_\_\_

SSI: \_\_\_\_\_

TOTAL HOUSEHOLD INCOME: \_\_\_\_\_

**COMPLETE DETAILS BELOW OF ALL CHILDREN 13 YEARS AND YOUNGER WHO RESIDE IN THE HOME**

**\*\*\*MUST PROVIDE DOCUMENTATION OF EACH CHILD LIVING IN HOUSEHOLD\*\*\***

(Social security card, birth certificate, school identification etc.)

NAME	AGE	SEX	PANT SIZE	SHIRT SIZE	SHOE SIZE	WISH LIST TOY (1 ITEM ONLY)
1.						
2.						
3.						
4.						
5.						

PLEASE EXPLAIN WHY YOU ARE REQUESTING ASSISTANCE: \_\_\_\_\_

Officer Use ONLY

Delivered by: \_\_\_\_\_

Received by: \_\_\_\_\_

Picked up by: \_\_\_\_\_

**I UNDERSTAND THAT FALSE INFORMATION WILL CAUSE MY APPLICATION TO BE REJECTED WITHOUT NOTICE**

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

**IF ANY INFORMATION/DOCUMENTATION IS MISSING, WILL CAUSE DENIAL**