

SUPPORT SIOUXLAND SOLDIERS FINANCIAL GRANT APPLICATION

IN ORDER TO QUALIFY FOR ASSISTANCE THE APPLICANT MUST:

- Be a Veteran as defined in Iowa Code (Chapter 35.1)
- First meet with your County Veterans Affairs representative to utilize any federal and/or state assistance that is available and have the case worker send a confirmation to siouxlandtroops@gmail.com
- Must be a Siouxland resident of Woodbury, Union, Dakota or Plymouth County
- Character of discharge must be either honorable or under honorable conditions
- Have a household income at or below 200% of the Federal Poverty guidelines and less than \$2,000 in liquid assets.
- There is a 45 day waiting period before assistance is rendered when veteran or spouse voluntarily quits any employment. (for any reason) Applicant (and spouse) must actively seek employment (visit in person at least twice per week) and be registered with IowaWorks. Persons unable to work, because of health reasons, should have current verification from their physicians showing inability to work and expected return to work date.

THIS IS A ONE-TIME EMERGENCY GRANT UP TO \$300 THAT CAN BE USED FOR:

- Travel expenses for wounded Veteran or visiting spouse
- Emergency Home Repair
- Emergency Vehicle Repair
- Medical Emergency expenses

PLEASE MAIL THE COMPLETED APPLICATION AND ONE COPY OF EACH:

- Form DD214
- Photo ID
- Birth Certificate
- Income verification for 30 days preceding assistance request
- current rent receipt or mortgage statement and

MAIL TO:

SUPPORT SIOUXLAND SOLDIERS
1551 INDIAN HILLS DR. SUITE 102
SIOUX CITY, IA 51104

VETERAN'S FULL NAME _____

DATE OF BIRTH _____

FULL ADDRESS _____

TELEPHONE NUMBER _____

EMAIL ADDRESS _____

DEPENDENT CHILDREN NAME AND AGE _____

OTHER MEMBERS OF HOUSEHOLD _____

SERVICE RECORD

DATE OF ENTRY _____

BRANCH _____

PLACE OF ENTRY _____

SERIAL NUMBER _____

DISCHARGE DATE _____

PLACE OF DISCHARGE _____

TYPE OF DISCHARGE _____

SERVICE CONNECTED DISABILITY ____ YES ____ NO

OVERSEAS SERVICE

WHERE _____

INCLUSIVE DATES _____

(CIRCLE ALL THAT APPLY) WWI WWII KOREA VIETNAM PERSIAN GULF POST 9/11

OTHER _____

WHICH SIOUXLAND COUNTY DO YOU RESIDE (CIRCLE): WOODBURY, UNION, DAKOTA OR PLYMOUTH

HOW LONG HAVE YOU LIVED IN SIOUXLAND? _____

INCOME AND RESOURCES

V. A. COMPENSATION OR PENSION _____

SOCIAL SECURITY _____

DIRECT AID _____

INTEREST, RENT, ETC. _____

PRIVATE EARNINGS _____

OTHER PENSIONS _____

SPOUSE SOCIAL SECURITY _____

OTHER SPOUSAL INCOME _____

CURRENT OR LAST EMPLOYER _____

LAST DAY WORKED _____

ASSETS

HOME VALUE _____

MORTGAGE EQUITY _____

OTHER REAL ESTATE VALUE _____

CHECKING ACCT. AMOUNT _____

SAVINGS ACCT. AMOUNT _____

SECURITIES, BONDS, ETCAMOUNT _____

LIST ALL VEHICLES (INCLUDE RECREATIONAL) _____

MONTHLY EXPENSES:

RENT/MORTGAGE _____

FOOD _____

CLOTHING _____

DENTAL OR MEDICAL _____

PRESCRIPTIONS _____

UTILITIES _____

INSURANCE _____

OTHER _____

PLEASE EXPLAIN YOUR FINANCIAL NEED:

BY SIGNING THIS APPLICATION, I GIVE SUPPORT SIOUXLAND SOLDIERS PERMISSION TO VERIFY ANY STATEMENT GIVEN IN THIS APPLICATION, VERBALLY OR IN WRITING, AS APPLICABLE. FAILURE TO PROVIDE COMPLETE AND ACCURATE INFORMATION SHALL RESULT IN DISQUALIFICATION FOR AID AND POSSIBLE PROSECUTION FOR FRAUD.

I, _____ HAVE READ (HEARD) THE ABOVE FORM. THE MATTERS THEREIN SET FORTH ARE TRUE AND COMPLETE.

SIGNED _____