



Journey of Faith Church

BENEVOLENCE FUND POLICY AND GUIDELINES

Objective of this Document

1. Establish a written process for the evaluation of requests for assistance from the Benevolence Fund.
2. Outline eligibility requirements and criteria for receiving assistance from the Benevolence Fund.
3. Describe the process involved in the request, approval and disbursement of monies from the Benevolence Fund.

This document will also specifically set forth the responsibilities of the Benevolence Fund Committee and the guidelines for discharging those responsibilities.

Biblical Basis for the Benevolence Fund

The Benevolence Fund Policy shall be guided by the following Biblical principles:

"If anyone has material possessions and sees his brother in need but has no pity on him, how can the love of God be in him? Dear children, let us not love with words or tongues but with actions and in truth." (1 John 3:17-18)

"Let us not lose heart in doing good, for in due time we will reap if we do not grow weary. So then, while we have opportunity, let us do good to all people, and especially to those who are of the household of the faith." (Galatians 6:9-10)

"All the believers were one in heart and mind. No one claimed that any of his possessions was his own, but they shared everything they had." (Acts 4:32)

Purpose of the Benevolence Fund

The Benevolence Fund is a budgeted fund made available to members, by application, of Journey of Faith Church who are struggling financially due to unforeseen circumstances. Its receipts consist primarily of contributions from members of the Church, and its expenses consist of funds disbursed for its intended purposes at the direction of the Pastor and/or the Benevolence Fund Committee.

Oversight and Accountability

A six (6) member committee will be appointed by the Pastor to serve as the Benevolence Fund Committee. At least three (3) members of this Committee will be responsible for reviewing/ screening the applications of members applying for assistance. These same three (3)



Committee members will make recommendations to the Pastor regarding the awarding of gifts from the Fund to qualifying Church members.

The Benevolence Fund Committee may be required to give an accounting to the Board of Deacons.

Benevolence Fund Committee

Until further changes are implemented, the current Journey of Faith Deacon Board will serve concurrently as the Benevolence Fund committee. Each Benevolence Fund Committee member serves at the appointment of the Pastor of the Church for a term of two (2) year(s). There is no restriction on the number of consecutive years a member may serve on the Committee.

Sources of Income for the Fund

All benevolence funds come from Church revenues generated primarily by congregational contributions designated to the Benevolence Fund, and, to a lesser extent, from the Church's general fund.

Contributions to the Benevolence Fund may not be earmarked or otherwise designated for a particular purpose or individual. Although Church members may designate their contributions to the overall Benevolence Fund, the leadership at JOF discourages the practice of giving to the Benevolence Fund in lieu of giving to the Church's general fund.

Church leadership may choose, at its discretion, to decline certain contributions that are designated or earmarked.

In order to comply with IRS regulations concerning charitable contributions, all contributions to the Benevolence Fund must be unconditional and without personal benefit to the donor.

Eligibility

Only members who have taken the passport class and submitted their membership covenant forms may qualify to receive assistance from the Benevolence Fund; and, the member must have received the right-hand of fellowship at least six (6) months prior to the date of the application request.

General Guidelines

The Benevolence Fund is intended as a source of last resort, to be used only after the Church member requesting assistance has explored all other possibilities of help from family, friends, savings, or investments. The Fund is intended to be a temporary help during a time of crisis.

Generally, assistance from the Benevolence Fund to a recipient or household cannot exceed a maximum amount within a 12-month period. The Benevolence Fund Committee will govern the amount of assistance offered according to the limit in place at the time of request. This limit will



be determined every December by the Benevolence Fund Committee, in conjunction with the Pastor. In very unusual circumstances, households and individuals who are in need of substantial funds and who have the opportunity to make a life-changing decision may continue to be assisted up to whatever limit the Benevolence

However, such cases must be reviewed carefully and additional accountability must be sought from the Church Board of Deacons (Benevolence Committee).

Disbursements from the Benevolence Fund may not be made in the form of a loan. Under no circumstance is a disbursement from the Benevolence Fund to be considered a loan. No disbursement may be repaid, either in part or in full, in money or in labor.

However, if the recipient desires to give to the Church at a later time, the recipient is encouraged to give directly to the general fund of the Church. At the discretion of the Pastor, the individual may be informed that the Benevolence Fund accepts designated giving, but only if the Pastor discerns that the Church member/recipient understands this is not a payback of what originally was given.

While not a requirement for every situation, a member requesting assistance may be asked to receive financial counseling. The Benevolence Fund Committee may deny help to anyone who, in its estimation, will have negative or irresponsible behavior reinforced by such financial help.

A member requesting help must be willing to give the Benevolence Fund Committee permission to follow up on any of the information provided to the Committee. The Committee will be sensitive to confidential issues.

Benevolence Need Categories

The stated purpose of the Benevolence Fund is to meet people's basic needs. This section lists some of the most basic needs, or circumstances, under which financial assistance may be disbursed from the Fund:

- Mortgages & Rents
- Utilities (lights, gas, water) – cell phones*, pagers & cable TV are not eligible expenses

*(*Phones may be considered on a case by case basis)*

- Food
- Medical treatment (including prescription drugs medically necessary for the treatment of an illness or injury)
- Transportation to or from a place of employment
- Assistance with funeral expenses may be considered for members, the spouses & children of members and for individuals for whom the member was "caretaker".
- Financial assistance for counseling will be considered if it is perceived that counseling would directly enable the individual to address a current financial situation. In such cases, the Committee will consult with the pastor to determine a specific amount.



Although not all inclusive, below is a list of some needs that may not be met by the Benevolence Fund:

- School expenses (i.e. tuition or fees), business investments, or anything that brings financial profit to the individual or household applying
- Pay-off of credit cards - Exceptions can be made when an individual has had to use a credit card in a crisis or emergency (e.g., hospitalization, death, etc.)
- Needs of individuals who are wanted by the law or for paying fines as a result of breaking the law
- Legal fees
- Penalties related to late payments or irresponsible actions
- Private school fees or tuition
- Business ventures or investments

Process of Applying for Assistance

A Church member or household seeking assistance from the Benevolence Fund should take the following steps:

1. Obtain a "Benevolence Request Application" from the Church office (or website). The application must be completed fully, with all supporting documentation attached, and returned to the Church office (Incomplete applications will not be processed).
2. The application will be reviewed by the Benevolence Fund Committee. The Committee may contact the applicant for additional information or to schedule a meeting. The Committee may also contact utility companies, previous employers, landlords, etc. to verify need.
3. The applicant will be informed of the status of his/her application no later than fifteen (15) business days from the Committee's receipt of the completed application.

If the Committee determines that the applicant is eligible for assistance, it will make the applicant aware of the amount and how the funds will be disbursed.

Disbursement of the Funds

All disbursements from the Benevolence Fund shall be made directly to the party or entity to whom payment is due (No funds will be given directly to the Church member or household requesting the assistance).



Journey of Faith Benevolence Application Instructions

Read this entire page before filling out the application. We will not process an incomplete application so please check to be sure you have completed the entire form (do not leave any field blank but put n/a or none). If you do not provide what is needed, we cannot help you.

Please understand that Journey of Faith (JoF) may not be able to give you immediate help. Allow up to 3-4 weeks for processing and understand that we cannot guarantee anything.

Return your completed application in person to the church office. Before you do, make sure you have attached the required documents of evidence. Do not email the church your application or evidences.

Journey of Faith Church
350 E Royal Ln. Suite #130, Irving, TX 75039
972-685-9402
For questions: jofchurch@gmail.com

Journey of Faith Benevolence Application

About You

Full Legal Name:		
Marital Status: Single Married Divorced Widowed	Sex: M F	Age:
Address:		
City:	State:	Zip Code:
How long have you lived there?		
Phone (home, work, cell):		
Email: <i>Email is our primary means of communicating with you</i>		

Other adults (18 yrs or older) living at your address				
Name	Sex	Age	Current Employer	Relationship to you

Minors (under 18 yrs) living at your address				
Name	Sex	Age	School	Relationship to you

Church Affiliation

How did you hear about Journey of Faith Church?		
JoF member: Yes No	Attend other church: <input type="checkbox"/> Yes <input type="checkbox"/> No	Don't attend church: <input type="checkbox"/> Yes <input type="checkbox"/> No
Does anyone at JoF know your situation? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If "Yes", who?		
If you attend another church, specify which church.		
Have you applied for assistance there? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If "Yes", who did you deal with? Provide name and phone number.		

Employment History

Are you currently employed? Yes No

List your and your spouse's present and past employment

	Place of Employment	Dates of Employment	Current or Previous	Reason for Leaving
You				
You				
You				
Spouse				
Spouse				
Spouse				

Please list current employment of other adults in the household

	Name	Place of Employment	Dates of Employment	Reason for leaving
1				
2				
3				
4				
5				
6				

Description of Need

To determine how and/or if we can assist, please provide the following information (Use separate page if necessary.)

What is your need today and what specifics help are you requesting?

A. Need (e.g. electricity)	B. Provider (e.g. Co/Serv)	C. Amount (e.g. \$153.00)

I understand that JoF Benevolence does not pay penalties for late payments (“late fees”)

Signature: _____

What is the crisis or the situation that has caused you to ask for assistance?

If assisted by JoF, how will you pay for next month’s bills (rent/utilities, etc)?

Monthly Household Income

Sources	Recipient	Amount	Documentation
Wages/Salary			
Wages/Salary			
Wages/Salary			
Wages/Salary			
Social Security			
SSI Disability			
VA Disability			
Retirement			
Food Stamps			
Family			
Friends			
Unemployment			
Workers Comp			
Child Support			
Other Agencies			
Any Other Income			
Total Monthly Income			

Assets

Checking Acct Balance	
Savings Acct Balance	
IRA/Retirement Fund Balance	
Value of Car 1	
Value of Car 2	
Value of House	

Monthly Expense

Expense Category	Monthly Payment	Current Amount Due
Rent/Mortgage		
Electric		
Gas		
Water		
Cable/Internet		
Phone/Cell Phone		
Car Payment 1		
Car Payment 2		
Gasoline		
Auto Insurance		
Home Insurance		
Health Insurance		
Groceries		
School Lunches		
Medical Expenses		
Child Care		
Child Support		
Consumer Loans Balance \$_____		
Credit Cards Balance \$_____		
Memberships (Gym, spa, etc)		
Other Expenses (explain purposes)		
Total Monthly Expenses		

Assistance by Others

Have you been assisted by any other church/agency/organization? Please list all churches, agencies, or organizations you have contacted for assistance. Provide the agency name and the name/phone number of the person you contacted. If you are a member or regular attendee of another church, you must apply there first. If you are not an JoF member or regular attendee and you live outside of Collin County, you must contact organizations in your own county before we will accept your application.

Churches/Agencies/Organizations Contacted*

Agency	Person Contacted	Phone

I hereby authorize the release of information to Journey of Faith Church (JoF) to receive the assistance I am requesting. I further certify the information I have stated is true and correct and that all income is reported. I understand JoF may verify the information on this application and that deliberate misrepresentation of information may subject me to denial of assistance and/or services.

I give permission for JoF to discuss my case with other agencies, businesses, churches, attorneys, individuals, and any others deemed necessary to verify application information and/or identify additional sources of assistance. I understand that all information will remain as private as possible within these entities.

I UNDERSTAND THAT THE BENEVOLENCE INTERVIEW PROCESS MAY INVOLVE POTENTIALLY UNCOMFORTABLE QUESTIONS AND ANALYSIS OF MY SITUATION AND SPENDING HABITS.

**I have read, understood, and agree to the policies above regarding the use of my personal information and the potential for discomfort in the Benevolence process.*

Signature* _____ **Date*** _____

A new commandment I give to you, that you love one another, even as I have loved you, that you also love one another (John 13:34).

RELEASE AUTHORIZATION

EACH APPLICANT MUST COMPLETE THE FOLLOWING (please use the copy on the next page for your spouse or other adult in the home to complete):

I. In connection with my Benevolence application, I understand that a report or an investigative background check may be requested that will include information as to my identity, character, personal and financial history, experience, and reasons for termination of past employment. I understand that as directed by Church policy, you may be requesting information from public and private sources about my: workers' compensation, Social Security benefits, driving record, court record, education, financials, and references.

II. Medical and workers' compensation information will only be requested in compliance with the Federal Americans with Disabilities Act (ADA) and/or any other applicable state laws. Applicants are entitled to know if financial assistance is denied because of information obtained by Journey of Faith Church from a reporting agency. If so, I will be notified and given the name and address of the agency or the source which provided the information.

III. I acknowledge that a telephonic facsimile (FAX) or photographic copy shall be as valid as the original. This release is valid for most federal, state and county agencies including the Minnesota Department of Labor.

IV. I hereby authorize, without reservation, any law enforcement agency, institution, information service bureau, school, employer, reference or insurance company contacted by Journey of Faith Church or its agent, to furnish the information described in Section 1.

The following information is required by law enforcement agencies and other entities for positive identification purposes when checking public records. It is confidential and will not be used for any other purposes. I hereby release the employer and agents and all persons, agencies, and entities providing information or reports about me from any and all liability arising out of the requests for or release of any of the above mentioned information or reports.

Please print your full name LAST FIRST MIDDLE

Please print other names you have used

Home Address (City State Zip Code)

Date of Birth

The following states **require** sex and race to obtain information:

AL, AR, FL, GA, IA, IL, IN, MI, OR, TX, WI

Sex: Male Female

Race: Asian Black Hispanic White Other

Driver's License Number State Issuing License

Name as it appears on license

Signature

Today's Date

Required Items for Benevolence Processing

Note: Every item listed on this checklist is required to complete a Benevolence Application. Since we cannot accept or process incomplete applications, please take the time and go step by step through this checklist to insure your application is complete. If any item is omitted or is not completed, the application will be considered void, and no assistance will be given.

When completing the Benevolence Application form, make sure that you have provided the following:

1. Completed and signed Release Authorization for every adult living at your address.
2. Photocopies of current and one prior month's bank statements (checking and savings), unemployment or Social Security statements, evidences of other income, or pay stubs to verify income for every adult living at your address.
3. Photocopies of current (less than 15 days old) bills that you want considered.
4. If you are requesting rent assistance: a photocopy of your lease agreement (first and last pages). We will only consider paying rent; you are responsible to pay any late fees.
5. If you are requesting bill assistance: Any bill submitted must be due in the current month. We cannot accept original bills so you must provide copies giving the exact amount due and the name and the address of the payee for every item listed as a need. Online printouts must also have the amount due and the name and address of the payee clearly printed on them.
JoF will make a copy of your Driver's License.

You will be notified of the next step if your application is complete.

Return your completed application in person to the church office. Before you do, make sure you have attached the required documents of evidence.

Color photocopy of the driver's license or other government issued photo ID for every adult living at your address. JoF staff will make color photocopies of the IDs for you.