

**Jackson College**  
**Employee Benevolence Fund**

*CONFIDENTIAL APPLICATION*

*Use this form to apply for money from the Employee Benevolence Fund. Please send the completed application to the Foundation Office, attention [Jason Valente](#), Maher Campus – Foundation. If you have any questions, please call the Foundation Office at 787-0244.*

Date: \_\_\_\_\_

Name of who funds are requested for: \_\_\_\_\_

Building: \_\_\_\_\_

Phone number: \_\_\_\_\_

Amount requested: \_\_\_\_\_ (maximum range \$500)

This form is being completed by: \_\_\_\_\_

Description of circumstances:

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For Committee Use Only

Date of Review \_\_\_\_\_

Members Present \_\_\_\_\_

Action Taken: