



MASJID NOOR, INC.

1032 PARK AVE, HUNTINGTON, NY 11743

(631) 683-4185

APPLICATION FOR ZAKAT / SADQA & FITRAH

Instructions:

1. Incomplete applications will be declined
2. Provide clear copies of:
 - Photo ID
 - Social Security Card or other form of ID
 - Proof of income (past years tax return, last month's pay stub)
 - Other documentation that will help in application process.
 - Please note we may request other documents during the application process as needed.

Note: Copies will NOT be returned and simply applying does not mean you are guaranteed assistance

Name: _____

Address: _____

Telephone No: _____

Age: _____

Marital Status: Single Married Divorced

Legal Status: U.S. Citizen Green Card Other

Please explain: _____

Have you received assistance from MNI before? Yes No

If yes, how much & when? _____

Have you received assistance from other Masjids before? Yes No

If yes, how much & when? _____

Employment Status:

Full-time Part-time Unemployed Self-employed Other

Please explain: _____

Please list your spouse's and children's names & ages (if applicable):

Please state reason for financial assistance in detail and an estimate of how much you require:

Note: MNI has the right to interview applicants as considered necessary. You will be asked to meet with our Zakat Committee and a Volunteer Social Worker. You will be required to come to MNI when asked.

Income and Expenses

Source	Amount	Item	Amount	Item	Amount
Work		Rent/Mortgage		Bank Accounts	
SSI		Utilities		IRA/Pension	
Gov't Aid		Car		Stocks, bonds, etc.	
Family Assistance		Food		House	
Other(explain):		Other(explain):		Other(explain):	

Any misrepresentation & non-compliance by the applicant will void the application & assistance. Please read before signing:

1. I authorize MNI to verify the information in this application and any documents submitted.
2. I understand I may be required to present proof of all of my statements made in this application.
3. I understand that of any misrepresentation & non-compliance by me voids the application & assistance.
4. I declare that I have examined this application, including any document submitted along with this application, and to the best of my knowledge and belief it is true, correct, and complete.

Applicant Signature and Date

Recommended by:

Signature: _____

Name: _____

Address: _____

Phone Number: _____

For Administration Use Only

Approved:

1) _____

2) _____

3) _____

4) _____

5) _____

Status:

Amount \$ _____

Zakat Sadqa Fitrah