



Questions?

Call 435-637-8911

ANGEL TREE

Applications must be submitted in person to:		
United Way of Eastern Utah	or	Pyramid
67 East Main Street Price, Utah		125 S Long Street Green River, Utah

No late applications will be accepted. The following must be received no later than 4:00 PM on November 15, 2018:

- Copy of any and all household income received by household members related and non-related. *Pay stubs must be current and include year-to-date earnings.*
- A 24-month Benefit Report from myCase (jobs.utah.gov/mycase)
- Legible copy of picture ID for head of household
- Complete and signed application

Without these items, applications will be rejected.

Completed applications MUST be submitted in person to United Way of Eastern Utah or Pyramid.

If your application is rejected, you will be notified by United Way of Eastern Utah by December 1st.
 If your application is accepted, you will be notified by United Way of Eastern Utah with approximate date when gifts will be available. The adoptive family will arrange a date, time, and place of delivery or pick-up of the Presents and you will receive a letter from them with United Way of Eastern Utah Angle Tree return address.

APPLICANT INFORMATION			
Head of Household's Last Name		First Name	Last 4 digits SS#
Other Household Member Last Name		First Name	Last 4 digits SS#
Physical Address		PO Box	Apt/Trailer Number
City		State	ZIP
Home Phone	Cell Phone #1	Cell Phone #2	
If no phone, name of other contact		Phone number for other contact	
E-mail address			
Please circle the best way for us and a sponsor to get in touch with you: Phone E-mail Text			
Head of Household's Employer		Other Household Member Employer	
Please circle your marital status: Married Divorced Separated Single, living alone Single, living with others Widowed			

INCOME This information will be kept confidential. Fill out completely. Include income for all household members related and non-related	
INCOME TYPE	MONTHLY GROSS AMOUNT
Employment	\$
Employment	\$
Public Assistance	\$
SNAP Food Stamps	\$
Social Security	\$
Unemployment	\$
Child Support	\$
Student Aid	\$
Family Assistance	\$
Total	\$
Church Assistance	\$
TOTAL	\$

QUESTIONNAIRE		
1. Do you have legal full time guardianship over all children for whom you are applying? If no, please explain here:	Yes	No
2. Have you ever applied for Angel Tree before?	Yes	No
3. Have you taken an IDA class in the last 3 years?	Yes	No
4. Are you in need of a Christmas tree if available?	Yes	No
5. Does anyone besides your children and spouse live at the address provided?	Yes	No
If yes, is that person also applying for Angel Tree?	Yes	No
If yes, please provide that person's first and last name:		

CHILDREN'S INFORMATION List only children under the age of 16. Sponsors generally provide 3-5 gifts per child. The items below will give them an idea of what your child likes or needs but there is no guarantee they will get the exact item(s) listed.

Child Name		Birthdate <u> </u> / <u> </u> / <u> </u>		Circle one: Male Female	
Pant Size	Shirt Size	Clothing sizes are: Kids, Teens, Adult		Favorite color	
Shoe Size	Type of shoe needed		Shoe size is: Toddler Kids Adult		
List 2 toy or gift ideas that cost under \$40 each					
List 2-3 clothing items your child needs					
Title of a book your child would enjoy			Author of the book		
What school is your child currently attending?					
Does your child need a coat? If yes what size Y N Size					

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IF YOU NEED MORE CHILDREN ADDED USE A SEPARATE SHEET OF PAPER

Sponsors would like to know why you are seeking help through Angle Tree. Please explain

If you are willing to share your story with the local media to encourage sponsors to give to the program, please sign below. All names are changed to ensure privacy. This in no way affects acceptance to the program.

Signature _____ Date _____

DISCLAIMER AND SIGNATURE by signing below, I am stating the information I have provided is correct and complete. If this information is false, I understand that I could be denied Angel Tree assistance and prosecuted for fraud. I give my permission to Angel Tree as well as other non-profit agencies, church groups, government agencies and programs to verify this information as well as share and gather any additional information that may be deemed necessary or helpful to complete the applicant review process.

Signature _____ Date _____