

Bridgeport Indian Colony
P.O. Box 37, Bridgeport, CA 93517
(760) 932-7083 / Fax 932-7846

APPLICATION FOR FINANCIAL ASSISTANCE

Emergency Food/Shelter/Utilities

Failure to provide all information requested by cause delays in processing this application
or result in the denial of assistance:

Name:

Address:

Phone:

Date of Birth:

SSN:

Check Box:

Member of this Tribe? []Yes []No

Has applicant received assistance from the Bridgeport Indian Colony (BIC) within the last two (2) years? []Yes []No
If yes, please explain:

Has applicant applied for other assistance? []Yes []No
If yes, please explain:

Amount of financial/emergency assistance requested? \$ _____

Please provide an explanation as to why you need this financial/emergency assistance and attach any supporting
documentation that you may have:

I certify that the foregoing information contained in this Application for Financial/Emergency Assistance is true and
correct to the best of my knowledge.

Dated: _____

Signature of Applicant: _____

OFFICE USE ONLY:
Date Received/Initials: _____ / _____