

Suburban Service League
Individual Support Request Application
Applications are accepted from September 1st through May 15th

Date:

Individual in need of support:

Name

Address

Phone Number

Email

If different from above: Name of person filling out form and relationship to individual in need:

Contact information of person filling out form:

Phone:

Email:

Does the individual know you are requesting support: Yes No

Please explain why the individual needs assistance.

Has this individual requested support from SSL in the past? Yes No

if Yes Approximately when?

Who referred or how did you hear about SSL?

Any other special fundraising accounts or current fundraising events scheduled?

What dollar amount are you requesting for this individual?

Any additional information you would like to share with the executive committee who will do the initial review of the request?

Completed application may be emailed to:
or mailed to:

sslrequest@gmail.com
Suburban Service League
PO Box 2073, Frankfort, IL 60423