



OPERATION ROUND UP
OEC FOUNDATION, INC.

Individual & Family Grant Application

The preferred method of application is online at www.okcoop.org/oru. If you choose to submit a paper application, please make sure you have included all required information. Incomplete applications will not be reviewed.

Name*

Photo ID*

Include a legible image of a recent photo ID. This is for identification purposes in our database.

Physical Address* Enter the street address of where you live or are staying even if you do not receive mail here.

Street Address, City, State, Zip Code

How long have you lived at this address? *

Enter Years and Months. Example: 1 yr, 2 mo.

Is your mailing address different? *

_____ Yes, my mailing address is different from my physical address.

Mailing Address:

_____ No, I receive mail at my physical address.

Email or Traditional Mail (select one) *

_____ I prefer email communication ONLY.

_____ I prefer Post Office delivered mail ONLY.

_____ Both/Either option will work.

Email communication is much quicker than traditional mail service. If you select post office only and we need additional information, your application may be delayed to the next scheduled foundation board meeting.

Decision letters will be mailed but also emailed if an email address is available.

Email Address:

Phone Number:

Current Relationship Status*

_____ Single

_____ Married

Name of Spouse:

_____ Divorced

_____ Partnership (long-term relationship
& you live together)

Name of Partner:

_____ Widowed

EMPLOYMENT

Applicant's Job Status*

Full-time Job

Part-time Job

Where do you work? *

How long have you been employed here? *

Enter as ## years, ## months. Example: 3 years, 5 months.

Wages. *

Enter as \$\$/hour; \$\$/week; \$\$/month. Example: \$15/hour or \$2,000/month

Include your most recent pay stub. *

Unemployed

Please explain why and how long you have been unemployed.*

Have you applied for unemployment benefits? * **Select One**

Yes. I receive unemployment. (Include your most recent statement.)

Yes. My application is pending

No. I do not qualify.

Other

Retired

When did you retire?

What was your previous occupation?

Do you receive SSI or retirement benefits?

Yes. I receive SSI/Retirement. (Include your most recent statement.)

My application is pending.

No. I do not qualify.

Other. Please explain.

Disability

Yes. I receive SSDI/Disability. (Include your most recent statement.).

My application is pending.

No. I do not qualify.

Other

Do you have one or more dependents who live with you? *

Yes

No

Dependents*

	First Name	Last Name	Age	Birthdate
1				
2				
3				
4				
5				

Financials*

ASSETS	Value	Year/Make/Model
Bank/Savings		
Vehicle 1		
Vehicle 2		
Home Value		

INCOME	Monthly Receipts	Other? (Specify)
Salary		
SSI/SSDI		
Child Support Received		
Pension/Retirement		
Other Income?		
DEBT	Monthly Debt	Other? (Specify)
Credit Card Debt		
Auto Loan		
Child Support Paid		
Medical Bills		
Car Payment(s)		
Other Debt?		
BILLS	Monthly Payments	Other? (Specify)
Rent/Mortgage		

Gas/Electric		
Food		
Water/Trash		
Telephone		
Cable/TV/Internet		
Auto Gasoline		
Other bill?		

REQUEST

Operation Round Up (ORU) helps in six core areas listed below.

ORU does not fund rent, utility bills, or settle past-due bills of any kind. It will fund projects, procedures, and items requested going forward. If you have a question about your funding request, call Education & Outreach Programs Director Tory Tedder-Loffland at 405-217-6726 or email ORU@okcoop.org.

Select the option that best represents your request.*

- Medical
- Food
- Clothing/Household Items
- Housing
- Education/Youth Programs
- Community Service

Use this area to fully explain your needs and why you are seeking help to meet those needs. *

LETTER OF RECOMMENDATION*

A letter from someone outside your family who can attest to your situation and needs.

Reference Email Address:

(Include only if you want ORU to request a LOR on your behalf.)

Add Personal Message (optional)

REFERENCES (personal and/or professional)

List three (3) personal and/or professional references. They may be called by an OEC Foundation board member or staff.

Reference 1 Name*

First Name

Last Name

Reference 1 Phone Number*

Reference Email

Reference 2 Name*

First Name

Last Name

Reference 2 Phone Number*

Reference Email

Reference 3 Name*

First Name

Last Name

Reference 3 Phone Number*

Reference Email

This application was prepared by ____ myself or ____ someone else. (select one)

Preparer's Name _____

Preparer's Signature _____

Preparer's Phone Number _____

Preparer's Email _____