

Cars That Care Foundation

We are a foundation who's primary objective is to help single mothers and their minor children with transportation needs. Help is awarded as resources are available, thank you for your patience.

Application for Assistance

Name _____ Date _____

Address _____ City _____

Zip _____

Phone _____ E-mail _____

References: Name of Bishop, Clergy, Social Worker, etc

Contact

Phone _____ Position _____ email _____

Dependent Children:

Age _____ Gender _____ Age _____ Gender _____ Age _____

Gender _____ Age _____ Gender _____ Age _____ Gender _____

Age _____ Gender _____

Do you live with your parents or other adults? YES NO

Do you live with your children? YES NO

Do you have custody of your children? YES NO

Marital Status _____

List all sources of income, Job, investments, unemployment, disability, welfare, alimony, child support, housing, etc. **Please list amounts.**

Do you have a valid **Utah** driver's license? _____ Can you get insurance? _____

Is your driving record clean? _____ If not list tickets: _____

_____ Do you have a criminal history ? _____ If yes, please explain _____

Do you currently have a vehicle? YES NO

Please list year, make, model and needed

repairs:_____

Are you seeking a vehicle? YES NO

Note: Applications must be filled out **completely**. Needs will be filled as possible, you will be notified if we can help you. Please submit to the FAX number below.

423 North 800 West, West Bountiful, UT 84087 Ph 801-294-4060 Fax 385-399-7614
