Zakat Application Form

Islamic Society of Greater Valley Forge
958 Valley Forge Rd Devon, PA 19333
(610) 688-2209 ISGVF_council@yahoo.com

PS: The ISGVF representative might call you and/or your references to verify the information.

SECTION 1: APPLICANT INFORMATION

Name:

Address:

Phone #: Email:

Gender (M/F): Marital Status:

Age: Number of Dependents:

Employment Status: Monthly Income:

SECION 2: FINANCIAL ASSISTANCE INFORMATION

Reasons for Financial Assistance:

Requested Amount:

References

Reference #1 Name: Contact #:

Reference #2 Name: Contact #:

Prior Zakat History (if any): If you have received ISGVF financial assistance during the last 6 months :

Organization Name: Amount /Date Received

I certify that the application information provided on this form is true and accurate to the best of my knowledge.

Name:

Signature: Date:

(Applicant or person who is filling for Applicant)

SECTION 3: ZAKAT COMMITTEE

Case In Charge:

Zakat Committee Approvals:

Approved Amount or specify reason(s) if rejected:

Amount Paid: _ _ Check# and Date Paid:

Treasurer Signature: