

MASJID UMAR BIN KHATTAB (IAM)
18105, Racho Road, Brownstown, MI: 48193.
734-281-8050.

Application for Zakat funds (Individual/family)

Contact Information: PLEASE COMPLETE ALL AREAS OF APPLICATION LEGIBLY.

Name	
Street Address	
City ST ZIP Code	
Home Phone	
Work Phone	
E-Mail Address	

INCOMPLETE APPLICATIONS WILL BE SUMMARILY REJECTED. PLEASE SUBMIT COPIES OF DOCUMENTS ONLY. DOCUMENTS SUBMITTED WITH THIS APPLICATION WILL NOT BE RETURNED.

References: (please list 3 VERIFIABLE references) (PLEASE PRINT)

1. NAME: _____

ADDRESS: _____

PHONE NUMBER: _____ E-mail address: _____

2. NAME: _____

ADDRESS: _____

PHONE NUMBER: _____ E-mail address: _____

3. NAME: _____

ADDRESS: _____

PHONE NUMBER: _____ E-mail address: _____

REASONS FOR SOLICITING ZAKAT FUNDS:

CURRENT SOURCE OF INCOME/EMPLOYMENT INFORMATION:

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PERSONAL INFORMATION:

MASJID OF ATTENDANCE:

FAMILY SIZE:

IDENTIFICATION PRESENTED: (please submit a copy of ID with this application)

Driver's license/Picture ID	
Social Security Card	

Agreement and Signature

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am approved to receive zakat from Masjid Umar bin Khattab /Islamic Association of Michigan, any false statements, omissions, or other misrepresentations made by me on this application may result in this application being rejected. I hereby authorize Masjid Umar bin Khattab/Islamic Association of Michigan to be my agent to distribute any approved zakat amount.

Name (printed)	
Signature	
Date	

FOR OFFICE USE ONLY:

ID CHECKED BY: _____ APPROVED/DENIED: _____
 AMOUNT APPROVED: _____ APPROVED BY: _____
 PRINTED NAME: _____ SIGNATURE/DATE: _____