

**Islamic Cultural Center of Northern California
Hardship Assistance Program-COVID-19 Emergency Application**

The purpose of ICCNC's COVID-19 Emergency Relief Fund is to provide short-term financial assistance for foods and basic life necessities to people in our community impacted by the COVID-19 outbreak. The financial assistance will be provided in the form of store gift cards or checks issued to service providers. The maximum amount is \$300 per applicant/household.

Name: _____

Contact number: _____

Address: _____

Preferred online video chat app:

FaceTime Skype Zoom Hangout WhatsApp Duo

E-mail address (optional): _____

Marital/Family status (optional): _____

How much assistance are you requesting: \$_____

Explain how you are impacted by the COVID-19 outbreak? _____

References:

Name: _____ Relation: _____ Contact #: _____

Name: _____ Relation: _____ Contact #: _____

Signature: _____ Date: _____

Please complete and sign the application form and submit it to ICCNC's office (1433 Madison St, Oakland, CA 94612) or email the form to hap@iccnc.org.