

**PETERBOROUGH HUMAN SERVICES FUND  
EMERGENCY AID APPLICATION**

Name \_\_\_\_\_ Home Phone \_\_\_\_\_

Address \_\_\_\_\_ Peterborough, NH

Email \_\_\_\_\_ Cell Phone \_\_\_\_\_

Do you prefer email \_\_\_ or text \_\_\_?

**Why are you applying for Emergency Aid? What do you need help with? How much will it cost and who do we pay?**

**List all members of your household:**

Name \_\_\_\_\_ age \_\_\_\_\_ how related? \_\_\_\_\_

Name \_\_\_\_\_ age \_\_\_\_\_ how related? \_\_\_\_\_

Name \_\_\_\_\_ age \_\_\_\_\_ how related? \_\_\_\_\_

Name \_\_\_\_\_ age \_\_\_\_\_ how related? \_\_\_\_\_

*Additional names/ages:*

**Please circle all programs you participate in:**

Peterborough Food Pantry  
SNAP / Food Stamps  
WIC  
School Meal Assistance  
Subsidized Housing

Medicaid / CHIP (Healthy Kids)  
SSI / SSDI  
FANF (formerly TANF)  
Fuel / Home Energy Assistance  
Other \_\_\_\_\_

Do you qualify for the Earned Income Tax Credit or Child Tax Credit? \_\_\_\_\_

**MONTHLY Income:**

Person #1 \$ \_\_\_\_\_ Employer \_\_\_\_\_

Person #2 \$ \_\_\_\_\_ Employer \_\_\_\_\_

Receiving Unemployment? \_\_\_\_\_ Amount per month \_\_\_\_\_

Other sources of Income and amount (for example: child support, social security disability)

\_\_\_\_\_

How much do you have in savings? \_\_\_\_\_

**MONTHLY Expenses:**

Rent/Mortgage	Phone/Internet
Auto Loan	Home/Auto Insurance
Medical costs	Medical Insurance
Utilities	Groceries
Credit card payments	Other bills

Other outstanding debt? \_\_\_\_\_

Have you applied for assistance anywhere else? \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

By signing this application, you give us permission to talk with relevant community providers, family resource specialists, or town welfare officers about your situation in an effort to best help you.

Applications can be mailed or delivered to:

Peterborough Human Services Fund (PHSF)  
One Grove Street  
Peterborough, NH 03458

Questions can be left on the Food Pantry phone, 603-924-3008.

The Emergency Aid coordinator will review your application and contact you with next steps.

Finally, the PHSF Board must vote to approve any emergency assistance request.