

**Christmas Giving Tree Application Form
Hillsboro USD 410
Hillsboro-Durham-Lehigh**

The Christmas Giving Tree is designed to assist financially limited households in providing Christmas gifts for children 17 years of age and younger who live in the Hillsboro USD 410 School District. Families are asked to specify gifts valued at \$50.00 or less for each child in their legal custody, age of 17 and under, living in their household. If the items you request are for clothing or shoes, please specify sizes.

We hope that you understand that due to the decline in our economy, everyone will have to make concessions. The Giving Tree Committee reserves the right to refuse service to anyone. **ALL INFORMATION IS TREATED WITH STRICT CONFIDENCE.** We use the State of Kansas Income Eligibility Guidelines. Please return this application along with a copy of your pay stub(s) and/or copy of Social Security letter, or letter of any public income assistance for ALL household members to Vintage Bank, 200 N Main, Hillsboro, AS SOON AS POSSIBLE, but no later than Wednesday, November 30, 2022. No late applications can be accepted without a letter of explanation and approval of the Committee. Gifts are to be picked up on Thursday, December 22, 2022, at Vintage Bank during the regular banking hours of 9:00 a.m. to 3:00 p.m.

Head of Household

Name _____

Address _____

Phone _____ Alternate Phone _____

Place of **ALL Employment/Source of Income** _____

Average Monthly Earnings \$ _____ (including child support)

Spouse or Other Income Earning Adults in Household:

Name _____

Place of **ALL Employment/Source of Income** _____

Average Monthly Earnings \$ _____ (including child support)

Name _____

Place of **ALL Employment/Source of Income** _____

Average Monthly Earnings \$ _____ (including child support)

Do you or any household member receive financial aid (SSI, TAF, Food Stamps, etc)?

If so, how much? \$ _____

(over)

Please list **several** gift requests per child with a value of **\$50.00** or less. **If clothing or shoes are listed, please provide size needed.**

First Child Name: _____ Male Female Age: _____
Shirt Sizes: _____ Pant Sizes: _____ Shoe Sizes: _____ (*please indicate child or adult sizes*)
\$50.00 Gift Request _____

Second Child Name: _____ Male Female Age: _____
Shirt Sizes: _____ Pant Sizes: _____ Shoe Sizes: _____ (*please indicate child or adult sizes*)
\$50.00 Gift Request _____

Third Child Name: _____ Male Female Age: _____
Shirt Sizes: _____ Pant Sizes: _____ Shoe Sizes: _____ (*please indicate child or adult sizes*)
\$50.00 Gift Request _____

Fourth Child Name: _____ Male Female Age: _____
Shirt Sizes: _____ Pant Sizes: _____ Shoe Sizes: _____ (*please indicate child or adult sizes*)
\$50.00 Gift Request _____

Fifth Child Name: _____ Male Female Age: _____
Shirt Sizes: _____ Pant Sizes: _____ Shoe Sizes: _____ (*please indicate child or adult sizes*)
\$50.00 Gift Request _____

Sixth Child Name: _____ Male Female Age: _____
Shirt Sizes: _____ Pant Sizes: _____ Shoe Sizes: _____ (*please indicate child or adult sizes*)
\$50.00 Gift Request _____

If additional space is required, please continue on the back or attach a separate sheet.

I understand that I am responsible for picking up these gifts from Vintage Bank on Thursday, December 22, 2022, between the hours of 9:00am and 3:00pm. I understand State of Kansas Income Eligibility Guidelines will be used.

SIGNED: _____ Date: _____