



OFFICE USE ONLY:
Date Appl. Received: _____

Work Project Application

Matthew 25:40

RESIDENT INFORMATION

Resident's Name: _____ Phone #: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Number of people living in this household: _____

Do you own this home? Yes: _____ No: _____

Do you own this property? Yes: _____ No: _____

Do you rent this home? Yes: _____ No: _____

Do you rent this property? Yes: _____ No: _____

If you rent, you must provide landowners/landlords name, address, and phone number so we can contact them about the work you are requesting:

Owner Name: _____

Owner Address: _____

City: _____ State: _____ Zip: _____

Owner Phone #: _____ Cell #: _____

Electricity Available: Yes: _____ No: _____

Water Available: Yes: _____ No: _____

Vehicle Access/Restrictions: Yes: _____ No: _____

Any Vehicle: _____ Van: _____ 4-Wheel Drive: _____ Pick-up Truck: _____

Car: _____

Type of Home: One Story: _____ Two Story: _____ Brick: _____ Frame: _____

Mobile Home: _____

Neither of these questions will eliminate your project from being considered:

Would you be able to provide materials for the project? Yes: _____ No: _____

Explain: _____

Would you be able to contribute financially toward project? Yes: _____ No: _____

If so, what amount? _____

Double check the following, and check appropriate blank:

Pets? Yes: _____ No: _____ Explain: _____

(You may be asked to remove pets from home/site at the time work is done)

Bees/Wasps obvious? Yes: _____ No: _____ Explain: _____

Is the roof sound? Yes: _____ No: _____ Explain: _____

Electrical Wiring in area? Yes: _____ No: _____ Explain: _____

Any other concerns? Yes: _____ No: _____ Explain: _____

Ladders: Is a ladder needed? Yes: _____ No: _____ Size: _____ft

Type: _____ Step: _____ Extension: _____

Will resident be able to provide a ladder? Yes: _____ No: _____

(Suggest neighbors, friends or relatives?)

Location of ladder: _____

Special Instructions to Work Crew: _____

Describe Work you would like to have done: _____

I, _____, agree to allow the Brothers' Keeper work camp participants to perform repairs and improvements on my home. I understand the amount of work completed depends upon the budget limitations and time available. Brothers' Keeper, through the West Virginia Baptist Convention and Jackson County Community Resources, Inc., do not guarantee that the work performed by participants will equal that of professional contractors. I understand the crew, made up of at least one adult and 2-6 youth, are volunteering their service to help me.

Resident's Signature: _____ Date: _____

Site Worker's Signature: _____ Date: _____

Please write directions to your residence on the back of this application.

MAIL COMPLETED APPLICATION TO: Brothers' Keeper, 1715 Lower Parchment Valley Road, Ripley, WV 25271.