



2323 South Fourth Street - DeKalb, IL 60115 – 815.758.8282

Three different ways to submit your application:

- 1- mail
2- email relief@dekalbtownship.org
3- fax to 815.758.0124

Applicant Name: _____

PLEASE PRINT

Address: _____

How long at current address: _____

Phone: _____ Email: _____

List names and ages of ALL people at same residence:

Table with 4 columns: Name, Age, Name, Age. Contains 7 empty rows for data entry.

Currently monthly gross income from all sources: \$_____

Have you completed an application previously? Y / N Amount requested: _____

Why do you need assistance? [Large text area for explanation]

I certify the information provided above is accurate and that I am authorized to apply for assistance on behalf of everyone in my household and to cooperate with DeKalb Township in providing any other information or applications that may reasonably be needed in connection with this application.

Signature of Township Resident

Date Submitted