

TEXAS VFW

FOUNDATION



DO NOT SUBMIT THIS PAGE WITH YOUR APPLICATION

WARRIOR DOWN FUND

PURPOSE OF THIS PROGRAM

The purpose of the Warrior Down Fund is to assist eligible veterans with **BASIC LIFE SUSTAINING NEEDS to avoid or curtail PRIVATION** and who have experienced a **unexpected and/or unforeseen hardship that they do not have resources to handle on their own.** This is not an entitlement program based on veteran status. This program does not provide EMERGENCY FUNDS, and not every person who applies will be approved.

Warrior Down Fund Eligibility Criteria

- ◆ The applicant must be a veteran with honorable service who have served in any foreign war, insurrection, or expedition, which service is recognized by the award of a campaign or service medal of the United States, or who served in Korea for either 30 consecutive days or 60 non-consecutive days, or who earned Hostile Fire or Imminent Danger Pay. Persons still serving in the active armed forces or one of its components may apply provided they meet eligibility requirements above. Immediate family member and/or unmarried surviving spouse of a qualifying veteran or service member that meets the eligibility standards above may also apply.
- ◆ The veteran/applicant must be a legal resident of the State of Texas and have been residing in Texas for at least six (6) months prior to application.
- ◆ The hardship is primarily due to no fault of the veteran/applicant and that the hardship is unexpected and/or unforeseen.

The following situations are not eligible and will be denied if the veteran/applicant is;

- Currently incarcerated.
 - Under indictment or determined to be guilty for a criminal violation or conduct resulting in financial hardship, e.g., DUI, DWI, driving without insurance driving with a suspended license, shoplifting, non payment of child support, etc.
 - A party to any civil legal action such as divorce, bankruptcy, tax liens, garnishments, etc.
 - A registered sex offender.
 - Loaned or paid money to others before meeting their own financial obligations.
 - Living beyond the means of the household.
 - Chronic unemployment with no evidence of attempts to become employed in any available job.
 - Poor financial management or decision making.
 - Any unemployment situation where the veteran/applicant is or was self employed by any business concern that they have an ownership interest in.
 - Voluntary job termination for any reason.
- ◆ The veteran/applicant has not received assistance from the Warrior Down Fund within the last 14 months (Exceptions for natural/man made disasters that result in a determination of a State of Emergency by federal and/or state government apply). Applications from previous grantees must not be for the same hardship reason.

Application & supporting documentation may be mailed, faxed, or emailed to our offices.

Texas VFW Foundation
Attn: Warrior Down Fund
P.O. Box 14468 Austin, Texas 78761
Phone: 512 291-6850 Fax: 512 834-9232
E-Mail: foundation@texasvfw.org
Website: www.texasvfwfoundation.org



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DOCUMENTS REQUIRED with your completed application:

- Proof of Military Service**— For veterans - Final discharge papers/DD-214, [Member Copy 4] that shows characterization of service as **“HONORABLE”**, Discharge must not be related to misconduct, unsuitability or a violation of the Uniform Code of Military Justice (UCMJ). Veteran must have served in any foreign war, insurrection, or expedition, which service is recognized by the award of a campaign or service medal of the United States, or who served in Korea for either 30 consecutive days or 60 non-consecutive days, or who earned Hostile Fire or Imminent Danger Pay. Persons still serving in the active armed forces or one of its components may apply provided they meet eligibility requirements above, or is an immediate family member and/or unmarried surviving spouse of a qualifying veteran or service member. **For current service members** - copy of current Military I.D. Card and copy of members Awards & Decorations page from their Service Record Book certified by the unit personnel officer will suffice.
- Proof of Texas Residency for at least six (6) months**— A valid Texas Drivers License, Texas ID card or Texas Voter Registration card with a photograph. For members of the military stationed out of state that do not have either document a copy of your most recent military leave & earnings statement showing Texas as your home of record.
- Copy of bills for which you are requesting assistance**. This must include the account holder’s name (either the veteran or legal spouse of the veteran), account number, as well as the creditor’s name, remittance information, total amount due, and statement must have a date not more than 30 days from date of application submission.
- Last years Federal Income Tax Return**. First two pages of Form 1040 series only. We do not need the entire return. If you do not have to file a tax return because you are exempt from doing so, you will need to submit an IRS Form 4506-T “Request for Transcripts of Tax Records” to the IRS and send to us the confirmation you receive from the IRS. We know this will take time so please submit your application to us along with a copy of the IRS Form 4506-T that you submitted to the IRS so we can preserve your place in line while awaiting the return correspondence from the IRS that you will forward to us once you receive it.
- Past three months financial statements showing transaction history on all accounts you have for every adult 18 years of age or older in the household**. This includes all checking accounts, savings accounts, retirement accounts, certificate of deposit accounts, money market accounts, all investment accounts, stocks, bonds, etc.
- Pages 8 & 9 must be fully completed**— You will need to work with an official representative of one of the listed agencies or if you are still in the service you must have your unit Chaplain or Commanding Officer complete and sign page 8. We are unable to proceed with your application if both of these pages are not completed in full.
- Any additional documents, statements or letters supporting your request**. These can be any document that you feel will help validate your hardship as being unexpected and unplanned.

Additional supporting documentation may be requested from you as your application is being processed.

Failure to submit these documents will only delay processing of your application. If your application is received without all of the supporting documentation requested above, your application will be delayed until you provide it to us or written notification stating why you do not have it.

Once we have received your completed application with all requested supporting documentation a representative may contact you to discuss the specifics of the case and/or to request additional information. This contact does not imply approval or denial of your application.

PLEASE NOTE: Due to privacy concerns status check requests for your application must be made by email while your file is being processed. Status checks by phone will be denied, and you will be directed to correspond your status check by email at foundation@texasvfw.org. Please include your full name in the request. We will let you know the status of your application as soon as possible. Our offices are not equipped to handle walk-in cases. Please work with one of the agencies listed on page 8 or the agency of your choice. Thank you for your patience, understanding, and service to our country. We do appreciate it.

To help expedite this process, please ensure you have submitted all required documentation when applying and as additional documents are requested. Failure to do so will only delay your application. Decisions about your case are based on all information available to us. You need to forward any additional documents applicable to your case as you receive them.

FINAL DECISIONS: Are mailed to the address listed on your application. If your mailing address, phone or email contact information changes while we are processing your application, please immediately inform us. Decisions of approval and denial are final and not subject to appeal. The Texas VFW Foundation is a I.R.S. 501 (c) (3) Charity. We are not a governmental entity or a subdivision of a government entity.



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FREQUENTLY ASKED QUESTIONS

1. I have a discharge that says “Under Honorable Conditions”. Do I qualify? The answer is NO. For the purpose of this grant the donor and the Texas VFW Foundation policy is that you must have an HONORABLE” discharge not related to misconduct, unsuitability, or a violation of the Uniform Code of Military Justice (UCMJ). You must have also served in a foreign war, insurrection or expedition, which service is recognized by the award of a campaign or service medal of the United States, or served in Korea for either 30 consecutive days or 60 non-consecutive days, or who earned Hostile Fire or Imminent Danger Pay.

2. I live in Texas, but do not have a Texas Driver’s License or I.D. Do I qualify? The answer is MAYBE. A current Texas Driver’s License, Texas I.D or Texas voter registration card with photo is the best way to prove Texas residency. Please contact us if you do not have any State of Texas issued identification.

3. I just moved to Texas and have resided here for less than six (6) months, do I qualify? The answer is NO, the best way to prove Texas residency is with a current Texas Driver’s License, Texas I.D or Texas voter Registration card with photo, not a temporary one.

4. I am a Texas citizen on active duty currently stationed in another state. Do I qualify? The answer is YES, as long as services you are asking assistance for are located here in Texas and your Leave and Earning Statement shows you are a resident of Texas.

5. I am in need of financial assistance today. Can I get immediate assistance? The answer is NO. The Warrior Down Fund is not able to process same day applications. The process can take 3-10 business days once your application is deemed complete.

6. When is my application deemed complete? The application is deemed complete when all supporting documentation has been received, the review committee has no further questions, and all bills presented have been verified.

7. If I am approved how much money will I get? The answer is NONE. The Warrior Down Fund cannot issue cash to you if approved. Instead, we will issue checks to your creditors. Those checks are included in the notice of decision sent to you so that you may forward them to your creditors. The maximum amount you COULD receive is \$2,500.00 in assistance.

8. I am not required to file a tax return. Am I still eligible for assistance? The answer is YES. If you do not have to file a tax return because you are exempt from doing so, you will need to submit an IRS Form 4506-T “Request for Transcripts of Tax Records” to the IRS and send to us the confirmation you receive from the IRS. We know this will take time so please submit your application to us along with a copy of the IRS Form 4506-T that you submitted to the IRS so we can preserve your place in line while awaiting the return correspondence from the IRS that you will forward to us once you receive it.

Please know that making fraudulent claims to obtain financial benefits is a criminal violation and legal repercussions may occur, including reimbursement of funds and possible criminal charges.

9. I do not have a bank account of any type. Am I still eligible for assistance? The answer is YES. We ask that you submit a written statement that you do not have any form of a banking or financial institution accounts, sign and date the statement and send to us with your application. The processing of your application may be delayed as we wait verification from the Department of Homeland Security that you do not have an account at a financial institution. Please know that making fraudulent claims to obtain financial benefits from government funds is a criminal violation and legal repercussions may occur including reimbursement of funds and possible criminal charges.

10. Do I have to have a veteran service agency/ military point of contact? The answer is YES. We will NOT process your application without one. Please coordinate with them for long term solutions from other resources.

11. Why do you require financial information on all adult members residing in the household? We require financial information on all adult members residing in the household because many items are shared by the members of the household, such as water, electricity, shelter, food, communications services, transportation, etc.

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FREQUENTLY ASKED QUESTIONS (*continued*)

11. I sent in my application and supporting documents. What happens next? The answer is that your application will be reviewed by our review committee. The review committee may ask for further information, in which case you will be contacted by a representative and asked to provide that information. We assist on a “first come, first served basis”. You may request a status update by sending an email to foundation@texasvfw.org. Include your full name and that you are inquiring as to the status of your application. Due to privacy issues ***we do not handle status requests over the phone***. A representative of the Texas VFW Foundation may call you to talk to you in person and/or to request further clarification or documentation that is needed for the review committee.

12. What if I do not have email? If you do not have email or access to email you can ask your Veteran Agency/ Military Point of Contact that you listed on page 8 to submit an email request on your behalf.

13. How will I know if I have been approved for a Grant? The answer is YOU WILL RECEIVE NOTIFICATION IN THE MAIL. Notices of decision are mailed for both approved and denied applications. If approved, the award and instructions are included.

14. I received a letter saying I was denied. Can I appeal this decision? The answer is NO. To avoid this and to give yourself the best possible chance at receiving assistance, please ensure you meet the eligibility criteria and disclose all information at the time of your application. If things change after you submit your application, please immediately notify us so we can add that to your file for review by the committee.

15. I was denied. Can I reapply for assistance if I feel my situation has changed from my original application or if I have another situation different from my first one come up? The answer is YES. You should submit new supporting documentation that you feel would have an impact on your situation along with a written request to “send back to review”. If it has been more than a year from date of your original application a complete new application is required.

16. I received a Grant. Am I ever eligible for another one? The answer is YES. There is a 14 month waiting period unless you reside in an area declared a state or federal disaster area due to a man-made or natural disaster event. The reason for hardship must not be the same as before.

17. Do I qualify if I am unemployed? The answer to this is MAYBE. Sudden unexpected unemployment constitutes a well-grounded claim for assistance. We know that each case is unique, and we evaluate each on a case-by-case basis. Chronic unemployment with no attempts to become employed even if the employment is not in your area of expertise will result in a denial. Any situation in which voluntarily job termination, for any reason, will be denied, as well as any situation in which full or partial ownership of a business is involved.

18. If I am approved what bills will I get assistance with? If you are approved you can receive assistance for basic life sustaining bills such as utilities, rent/mortgage, insurance, transportation costs, etc.

19. What bills will not be paid? If approved we will not assist with any fees, fines, judgments, citations, legal fees, higher education, child support, alimony, spousal support, political contributions, religious tithing, phone, cable, repairs, down payments or any other expense not considered by us as a basic life sustaining need to avoid privation.

20. Your application is too long and you require too many documents. Why is this? Since we started providing assistance to veterans in 2003, we have had to revise our application numerous times due to premeditated and deliberate attempts by applicants to defraud the Texas VFW Foundation to obtain funding. In these situations, the applicants were denied and turned over to the authorities for prosecution. This has resulted in the current application and requirements for supporting documentation. We want to help you, yet at the same time we have to be good stewards of the limited resources we have to help veterans and their families. While the application process may be lengthy, you can get through the process faster with full disclosure and truthful representations. Please understand this assistance is not an entitlement simply because you are a veteran. It is a program created by war veterans to assist eligible veterans who qualify with temporary short term assistance.

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MILITARY MEMBER/VETERAN INFORMATION

LAST NAME:		FIRST NAME:		MIDDLE NAME:
SOCIAL SECURITY NUMBER:		BIRTHDATE		
ADDRESS:				
CITY:	STATE:	COUNTY:	ZIP:	
PHONE:		MOBILE/CELL:		
EMAIL:				
List all persons residing in household:				
Name: _____	Age: _____	Relationship: _____		
Name: _____	Age: _____	Relationship: _____		
Name: _____	Age: _____	Relationship: _____		
Name: _____	Age: _____	Relationship: _____		
Name: _____	Age: _____	Relationship: _____		
Name: _____	Age: _____	Relationship: _____		
Name: _____	Age: _____	Relationship: _____		

APPLICANT'S INFORMATION

If different from above OTHERWISE LEAVE BLANK

NAME:		BIRTHDATE:		AGE:
ADDRESS: <i>Home of record for military members currently serving outside the geographical boundaries of Texas.</i>				
CITY:	STATE:	COUNTY:	ZIP:	
PHONE:		EMAIL:		
SOCIAL SECURITY NUMBER:				
I SERVED IN OR AM PRESENTLY SERVING IN THE:				
<input type="checkbox"/> Air Force <input type="checkbox"/> Army <input type="checkbox"/> Marines <input type="checkbox"/> Navy <input type="checkbox"/> Coast Guard				
AS OF THE DATE OF THIS APPLICATION MY CURRENT STATUS IS:				
<input type="checkbox"/> Active Duty <input type="checkbox"/> Reserves <input type="checkbox"/> National Guard <input type="checkbox"/> Veteran				
I SERVED OVERSEAS IN: <i>Check all that apply,</i>				
<input type="checkbox"/> World War II <input type="checkbox"/> World War II Occupation (1945-55 in Europe, Japan) <input type="checkbox"/> World War II Occupation (1945-90 in Berlin)				
<input type="checkbox"/> Korea (1950-54) <input type="checkbox"/> Korea (1955-Present) <input type="checkbox"/> Vietnam <input type="checkbox"/> Desert Storm <input type="checkbox"/> Bosnia/Kosovo <input type="checkbox"/> Afghanistan <input type="checkbox"/> Iraq				
<input type="checkbox"/> Other _____				
MY PERIOD OF SERVICE WAS FROM _____ TO _____ . Years only.				

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REQUESTING ASSISTANCE WITH

Please describe the expenses you need assistance with (i.e. Rent, utilities, food, vehicle, etc.)

Expense	Amount	Expense	Amount
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$

Amount requested

\$ _____

REASON FOR FINANCIAL HARDSHIP

Please describe what happened that has created the financial hardship. Attach additional documents as necessary.

WHAT I HAVE DONE TO RESOLVE THE HARDSHIP

Please explain what action (s) you have taken to resolve this hardship on your own, other than applying for assistance.

OTHER AGENCIES I AM WORKING WITH TO RESOLVE HARDSHIP

Please list other agencies you are working with and how they have helped (Red Cross, Salvation Army, Local Church, Food Bank, etc)

Agency	Point of Contact	Phone Number with Area Code

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MONTHLY INCOME OF ALL ADULT HOUSEHOLD MEMBERS

INCOME TYPE	AMOUNT
Veteran Primary Job	\$
Spouse Primary Job	\$
VA Benefits	\$
Social Security	\$
Disability	\$
Retirement	\$
Child Support	\$

TYPE	AMOUNT
Food Stamps	\$
Unemployment	\$
Childcare Assistance	\$
Spousal Support	\$
Other Job Income	\$
Roommate Income	\$
Other	\$

TOTAL OF SAVINGS/INVESTMENTS OF ALL ADULT HOUSEHOLD MEMBERS

CHECKING	SAVINGS	INVESTMENTS	RETIREMENT
\$	\$	\$	\$

MONTHLY EXPENSES OF ALL ADULT HOUSEHOLD MEMBERS

Complete all fields with an approximate monthly amount. Leave inapplicable fields blank.

EXPENSE	AMOUNT
Rent/Mortgage	\$
Utilities	\$
Phone	\$
Mobile Phone	\$
Cable	\$
Internet	\$
Vehicle #1	\$
Vehicle #2	\$
Vehicle #3	\$
Watercraft	\$
Recreational Vehicle	\$
Insurance	\$
Vehicle (s) Fuel	\$
Food	\$
Household Items	\$

EXPENSE	AMOUNT
Child Care	\$
Child Support	\$
Credit/Charge Cards	\$
Loans	\$
Student Loans	\$
Spousal Support	\$
2nd Mortgage	\$
Other	\$
Other	\$

Total Monthly Income \$ _____

Total Monthly Expenses \$ _____

Without a completed budget your application may be denied.



All applications are individually reviewed on a case-by-case basis. Submitting an application does not guarantee payment of funds. The Texas VFW Foundation reserves the right to make exceptions on a case-by-case basis. Texas VFW Foundation offices are not equipped to handle walk-in cases.

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NOT TO BE FILLED OUT BY APPLICANT

CURRENT ACTIVE DUTY/RESERVE/NATIONAL GUARD APPLICANT'S SECTION APPLICANTS' MILITARY POINT OF CONTACT

For CURRENT service members only—Must be in Chain of Command E-8 or above

Please Type or Print Legibly. **To be completed by applicants Chain of Command E-8 or above.**

First Name _____ Last Name _____ Rank/Title _____

Primary Phone: (____) _____ Alternate Phone: (____) _____

Email: _____ @ _____ Unit: _____

I am aware of this applicants situation and verify the needs are legitimate.

Signature: _____ Date: _____

VETERAN APPLICANT'S SECTION APPLICANTS' VETERAN SERVICE AGENCY POINT OF CONTACT

For veterans no longer in the Military, Reserve or National Guard.

Please Type or Print Legibly. **To be completed by official representative of the agency listed below.**

First Name _____ Last Name _____ Rank/Title _____

Primary Phone: (____) _____ Alternate Phone: (____) _____

Email: _____ @ _____ Location: _____

I am an official representative of: *Please check or print organization.*

<input type="checkbox"/>	Texas Veterans Commission
<input type="checkbox"/>	Texas Workforce Commission
<input type="checkbox"/>	County Veterans Service Officer
<input type="checkbox"/>	Veterans Administration
<input type="checkbox"/>	State/Federal Senator's office
<input type="checkbox"/>	State/Federal Representative's office
<input type="checkbox"/>	VFW Post/ Service Officer

<input type="checkbox"/>	American Legion
<input type="checkbox"/>	Red Cross
<input type="checkbox"/>	AMVETS
<input type="checkbox"/>	Marine Corps League
<input type="checkbox"/>	American GI Forum
<input type="checkbox"/>	Vietnam Veterans of America
<input type="checkbox"/>	Disabled American Veterans

<input type="checkbox"/>	Military Order of the Purple Heart
<input type="checkbox"/>	Paralyzed Veterans of America, Inc.
<input type="checkbox"/>	Iraq & Afghanistan Veterans
<input type="checkbox"/>	Texas Workforce Vet Center
<input type="checkbox"/>	Other -
<input type="checkbox"/>	
<input type="checkbox"/>	

I am aware of this applicant's situation, and I am working with this veteran to obtain local, state & federal benefits and resources they may be eligible for.

Signature: _____ Date: _____



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TERMS AND CONDITIONS:

Please **initial** (Checkmarks or X's are not accepted) and complete all signatory blocks below and return immediately. This form is essential to the review and approval process. We want to emphasize that each application will be reviewed independently and each case will stand on its own merit.

_____ I understand the following **FEDERAL FALSE CLAIMS ACT—31 USC 3729-3733**. (Updated August 2010 an incorporating passage of Pub. L. No. 111-203, 124 Stat. 1376) § 3729. False claims—(a) Liability for certain acts. (1) In general. Subject to paragraph (2), any person who-- (A) knowingly presents, or causes to be presented, a false or fraudulent claim for payment or approval; (B) knowingly makes, uses, or causes to be made or used, a false record or statement material to a false or fraudulent claim; ... is liable to the United States Government for a civil penalty of not less than \$ 5,000 and not more than \$ 10,000, as adjusted by the Federal Civil Penalties Inflation Adjustment Act of 1990 (28 U.S.C. 2461 note; Public Law 104-410), plus 3 times the amount of damages which the Government sustains because of the act of that person.

_____ Due to privacy concerns, status check requests for applications must be made by email while your file is being processed. Status checks by phone will be denied, and you will be directed to correspond your status check by email to **foundation@texasvfw.org**. Please include your full name in the request. We will let you know the status of your application as soon as possible.

_____ I understand that proper stewardship requires I provide information to substantiate my request, including governmental records, expense/income information, and medical information. I give my permission to share this information with other agencies to assist in processing my application for assistance. This will be kept confidential. I further indicate that if the request cannot be substantiated, it will not be possible to consider or approve it.

_____ I agree to allow the Texas VFW Foundation access to my account information for the sole purpose of payment remittance. I will submit documentation of the expenses for verification by Warrior Down Fund personnel.

_____ I understand that I should submit updated information as I receive them while my application is being processed. Any bill that cannot be independently verified will not be paid. Receipts, hand written invoices, statements with \$0 due, and notice of automatic withdrawal will not be accepted.

_____ I understand that if I fail to submit requested documents **within 45 days of request** and I have not corresponded with the Foundation during that time, my application will expire and I will not be notified of the expiration.

_____ I understand the primary purpose of the Warrior Down Fund is to meet the unique and urgent needs of Texas military/veterans and their immediate family members that meet our eligibility standards as outlined on pages 1 and 2, and it **is not a wage replacement due to unemployment nor is it a pension or entitlement program based on veteran status.**

_____ I agree to obey all the policies of the program and comply with any reasonable directions with respect to questions or concerns that may arise.

_____ I understand that I will send legible copies of original documents only as entire application and all supporting documents will not be returned.

_____ I agree to hold the Texas VFW Foundation, the Veterans of Foreign Wars of the United States, the Texas VFW, their agencies, officers, employees, agents, sponsors and subordinate units harmless as a result of this request and their handling of it and waive all rights to seek damages from these parties for any loss or perceived loss that may occur.

_____ If approved for a grant I understand that my last name, first initial, service branch and situation may be used to advertise, solicit, promote veteran's issues and thank donors of the program.

Applicant Signature

Date

Printed Name