



APPLICATION

We want to bring joy to seniors who may be facing a difficult holiday season due to isolation, loneliness, illness, or the loss of a loved one.

Seniors must be 65+ with an income below \$38,000 for a single household, \$44,000 for a household of two or be a permanent resident of a care facility. Recipients from previous years will not be considered. This program is intended for seniors experiencing social isolation or limited support. ***It is not intended for active seniors who already have strong social support in place (ie: lives with a family member, has engaged family or friends, will not be alone over the holidays, etc.)***

Application deadline is **November 13th**. The first 150 qualifying applications will be fulfilled.

Senior Name: _____ Birth Date: _____ Age: _____
(must be 65+)

Street Address: _____

City: _____ State: _____ Zip Code: _____

Gender: _____ Male _____ Female / Veteran: _____ Phone: _____

Specific Gift Requested by Senior: *Please, have a thoughtful conversation with the senior you are nominating asking what they **would truly like or need** (up to \$50, no gift cards, please). It's important the request comes from them, ensuring it's something they genuinely desire.*

Sizes (if applicable): _____ (there are no exchanges or returns on clothing or slippers)

I'm nominating this senior because: _____

Nominator Name: _____

Organization: _____

Phone: _____ Email: _____

Relationship to senior: _____

YES: _____ *I have spoken with the nominee, and they are aware that they will be contacted by Senior Wishes*