



Address: 11 Leng Kee Road
Singapore 159091
Tel: 6265 0291 Fax: 6265 0271
Email: Manager@compassionfund.sg

Referred by

Name:

Designation:

School/Organization:

Contact:

Email:

Remarks / Any other information that would be helpful in evaluating this application:

Eligibility / Supporting Documents

Please tick (✓) whichever applicable:

- Family must face a loss of income (within 1 year of application) due to crisis.
- Crisis must be death, illness or accident (***We will not be able to assist for other issues e.g. imprisonment, retrenchment, or homelessness***)
- Family must include school going students.
- Family must have limited financial resources (lower income/savings) to cope with crisis.
- Family has given consent for this application.

Please email/fax completed application form to manager@compassionfund.sg / 6265 0271 with the following documents:

- Medical Certificate of affected family member in crisis.
- Household bills – E.g. SP Services, Town Council, Telephone/ Internet (latest).
- Savings account of both parents with name(s) of account holder, account number and bank name, and page that shows updated recent balance.
- Most recent payslips of all working adults in household.
- All other relevant documents to support application, including any insurance/CPF claims letters, legal documents, loan/debts/arrears incurred, letters showing other assistance received from agencies etc.