

MAGIC CITY KIWANIS / ESTHER RYAN SHOE APPLICATION

Return completed application to: 633 Brady Ave, Barberton, OH 44203.

Questions - 330.753.1025

Step 1: Stu	dent Information:								
Print the name of EACH Stud (First and Last)	dent Birtho	Birthdate		Gender Scho		Grade Level		SCHOOL USE: Shoes Received Date / Initials of Official	
,									
Step 2: Inc Do ANY household members (child	come and Expenses or adult) currently rec	eive SNAF	P, EBT, TAN	F benefits?	Yes No		Total Househo	ld Members:	
Print the name of ALL OTHER Household Members	Earnings from Work	How Often?	Public Assistance/SS/Child Support/Alimony/ Other		How Often?	R	Monthly Expenses: Rent / Mortgage: \$		
	\$		\$					Gas \$	
	\$		\$			V	Water \$ Cell \$		
	\$		\$			С	ar/Transportation	\$	
Person Completing Application							SCHOOL USE ONLY	/ – DO NOT COMPLETE	
Printed	Signature	Signature			Date		Approved: Yes No		
						No.		Initials	
This is a confidential application and Magic City Kiwanis/Esther Ryan Shoe		ol personn	el and appro	oved voluntee Revised 7/		8000	ate:		