



## Blue Santa Application for Robinson Police Department

**Application Deadline: December 02, 2019 @ 5:00 P.M.**

Today's Date: \_\_\_/\_\_\_/\_\_\_

**Please Print:**

Nominees Last Name:	<b>FAMILY NUMBER</b>
	<b>FOR OFFICE USE ONLY</b>

Have you/nominee applied for assistance with any other agency?	Yes	No
If yes, with what agency or program?		
Is there more than one family living in the household?	Yes	No
Is the other Family included in this application?	Yes	No
<p><b><u>APPLY ONLY ONCE.</u></b> Application does not guarantee sponsorship. Nominees must live within the City limits of Robinson or attend Robinson ISD school. <b>If Nominees have received Blue Santa donations for 2 consecutive years, the application may not be approved pending number of families that apply. Nominees will be notified by November 25, 2019 if they are not approved for 2019 Blue Santa.</b> Applications can be turned in to the Robinson Police Department, faxed to 254-662-2310 or emailed to <a href="mailto:c.lopez@robinsontexas.org">c.lopez@robinsontexas.org</a></p> <p>If there is a change of address or phone number, Robinson Police Department must be notified immediately. You may contact Officer Chris Lopez or Melissa Leavelle at 254-662-0525 or by email: <a href="mailto:c.lopez@robinsontexas.org">c.lopez@robinsontexas.org</a> or <a href="mailto:m.leavelle@robinsontexas.org">m.leavelle@robinsontexas.org</a></p> <p><b>Change of address must be received no later than 12/16/2019</b></p>		

Nominees must provide proof of residency and/or school registration for RISD

### Acceptable Forms of Residency

- |                       |                          |
|-----------------------|--------------------------|
| * Utility Bill        | * Rental/Lease Agreement |
| * Home Telephone Bill | * Property Tax Bill      |
| * Cable Bill          | * School registration    |

**NAME ON PROOF OF RESIDENCY MUST MATCH THE NAME OF THE NOMINEE**



FAMILY NUMBER

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### Nominees

Nominees Last Name \_\_\_\_\_

NOMINEE'S ADDRESS: \_\_\_\_\_

NOMINEE'S PHONE NUMBER: \_\_\_\_\_

Please list all household members including the applicant.

**\*Please provide clothing and shoe sizes if they are needed. If they are not needed, then they do not apply.**

**Children 18 and under  
(please list youngest to oldest)**

	First Name	Last Name	Age	Gender M/F	Clothing Size <small>*include if size is toddler, youth or adult sizes</small>	Shoe Size <small>*include if size is toddler, youth or adult sizes</small>
1						
2						
3						
4						
5						
6						

Parents/Caregivers Name \_\_\_\_\_

Phone number \_\_\_\_\_



