



35 Harper-Hill Drive Ajax ON L1Z 0P6 | (416) 666-9786 | www.disdo.org

ZAKAT ASSISTANCE APPLICATION

Durham Islamic Society Durham Ontario (DISDO) accepts requests for financial assistance from Muslims that are zakat-eligible (in extreme poverty or financial hardship) and is a good standing member of the local DIS community. The following form must be completed in its entirety with all supporting documentation to initiate a Zakat/ Financial Assistance request. The office will not be able to accept or review any incomplete applications.

Important Notes

- Zakat assistance is need based one-time assistance, subject to available funds.
- All applications must be submitted by the applicant in person at the DIS office during business hours. Electronic submissions or documents will not be accepted.
- This application is not for emergency or dire cases. Allow at least 14 business days for the Zakat Committee to review and process your application. The DIS office will not have any status on your application before this time.
- All applicants must first contact their local Dept of Social Services for assistance (including for emergency cases) and attach a copy of benefits and/or decision letter provided.
- Applicant must be a Muslim of good community standing and must not have any criminal record or convictions. DIS will conduct a criminal background check for each applicant.
- The decision made by the Zakat Committee will be final. If you enter a n email address below, you may be notified of the application status once a decision has been made.
- Applicant is responsible for reporting all Zakat assistance income to the CRA and other government agencies for any tax and legal reporting purposes.
- You authorize the Durham Islamic Society Durham ON to share report and verify the information provided on this form for the purposes of this request with any local, provincail and federal organizations or companies including other Islamic organizations and Mosques as needed.
- If additional information is requested by the zakat committee, please submit documentation/information within a timely manner. If no response is provided within a span of 2 weeks, you will be required to resubmit an application and processing will restart.
- Please use additional sheets of paper to provide details for any of the information requested below.

The following supporting documents MUST be attached to this application:

- Copy of a valid government issued photo ID (i.e. Driver's License, Passport) and Social Insurance card.
- Copy of any outstanding bills for living expenses (rent, utilities, medical, etc).
- Application decision or determination letter from Service Canada.
- Proof of all current income (**including paystubs and bank statements for the past 90 days**), or if no income then a statement on how you plan to provide for your expenses in the future if your application is approved.
- If you are not from the local DIS area zip codes (L1V, L1T, L1N, L1C, L4A, L1J, L1G, L1S, L1R, and L1K), you must provide a current official letter from your local Masjid Imam or Director stating their inability to help and referring your case to the Durham Islamic Society Durham Ontario for consideration.
- If you have any type of previous criminal record or have extenuating personal circumstances and are seeking any exception by the Zakat Committee, please detail your request on a separate sheet of paper and list two additional references below from the local DIS community that can verify your case.

Instructions - Please Read Carefully - Incomplete applications will not be accepted.

PERSONAL INFORMATION					
Applicant Name:			DOB:		
Address/City:			Province:	Postal Code:	
SIN:		Cell:		Email:	
Are you Muslim?		Have you ever been convicted of a crime?		Do you have any criminal cases filed against you?	
<input type="checkbox"/> Single	<input type="checkbox"/> Married	<input type="checkbox"/> Divorced	<input type="checkbox"/> Widow	<input type="checkbox"/> Male	<input type="checkbox"/> Female

ADDITIONAL INFORMATION	
Have you applied for Zakat or any financial assistance with DIS before: Yes _____ No _____	
Dates/Amount(s) of aid previously received:	
Have you applied for benefits with any Islamic Relief or Zakat Agency? Yes _____ No _____	

**Must have applied with Service Canada and attached a copy of the application decision*

INCOME AND EXPENSES			
INCOME	AMOUNT	MONTHLY EXPENSES	AMOUNT
Work/Unemployment Income		Rent/Mortgage	
Social Assistance / EI Income		Utilities/Phone	
Child Support		Medical	
Current Assets (cash, stocks, etc)		Debt	
Other Assets/Income		Health Insurance	

OTHER AID/BENEFITS RECEIVED			
(Cash Assistance Programs)		Social Services/Food support	
Subsidized/Public Housing		Any Energy Assistance Program	
Medical Assistance		Alimony	
Friends and Family Support		Other Aid Received (Inc. Zakat)	

DEPENDENT INFORMATION				
No	Name	M/F	Age	Relation
1				
2				
3				
4				

ZAKAT REQUESTED FOR			
Need	Amount	Need	Amount
Rent		Medical	
Food/Utilities		Other	
Total Zakat Requested:		\$	
Have you ever been refused Zakat assistance before from any Islamic organization? <i>*If yes, explain on a separate sheet of paper</i>			
			Yes _____ No _____

REASON FOR APPLYING & ANY ADDITIONAL DETAILS

REFERENCES (Please provide names of whom DIS can contact to verify your information)		
Name	Phone	Relationship

ADDITIONAL DIS COMMUNITY REFERENCES		
Name	Phone	Relationship

CERTIFICATION

I have read and understand this entire application. I attest to Allah (swt) and under the penalty of perjury, that all the information provided on this form is true and accurate to the best of my knowledge. I agree that the information provided in this application will be utilized in connection with this request and I authorize any person(s), organization, or governmental agency that knows the facts about my eligibility to give that information to the DIS. I hereby agree to hold harmless and defend DIS and any of its representatives, Council, staff and agents against any and all demands, claims, liabilities, suits, causes of action, judgments, damages, etc that may arise, however caused.

Signature: _____

Date: _____