



MEADOWVALE
ISLAMIC
CENTRE

6508 Winston Churchill Blvd., Mississauga, ON L5N 3W4
Ph: 905.824.2604 | info@mici.org | <http://www.mici.org/>

Sadaqah / Zakat / Fitra Application form

PLEASE NOTE:

- This application must be completed in BLOCK letters.
- All questions on the application MUST be answered to determine eligibility of Zakat or Sadaqah
- Please include copies of SIN & Photo ID (License or Health card) to support your application
- Information provided on this application will be kept confidential
- ID IS REQUIRED AT THE TIME OF RECEIVING THE CHEQUE

First name:	Last Name:
SIN#:	Phone No. (Home):
Date of Birth:	Phone No. (Cell):
Full Address (Incl. Apt # and Postal Code):	Name & Location of nearest Masjid:
Status in Canada (Citizen/ Immigrant/ Refugee/ Visitor/ Other):	Marital Status:
Are you Currently Employed: (Yes/No):	Have you previously applied for support to Meadowvale Islamic Centre ? (Yes/No):
If yes, What is the name of the Employer:	What is your Monthly Income, through Employment / Employment Insurance: \$
No. of dependent children under the age of 18:	Amount Requested: \$
Support from all Masajid in last 12 months (Total amount): \$	Other Monthly Income (eg. Govt. Welfare/Disability/Child Benefit): \$
Do you have greater than \$4,000 combined value of gold, silver, cash, investments, property, savings (Yes/No)? (Do not include primary residence, or personal items like Car or electronic equipment)	
Reasons or purpose for the amount requested (If insufficient space, use a separate sheet of paper):	

I hereby declare that to the best of my knowledge the information in this application is true. I realize that the Meadowvale Islamic Centre may verify the information.

Signature: _____ Date: _____

FOR OFFICE USE ONLY:

Amount released: _____ Approved by: _____ Signature: _____

Received \$ _____ Date: _____ Recipient Signature: _____



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Consent Agreement

I hereby understand, agree and approve that Meadowvale Islamic Centre may reach out to other organizations to verify in reference to my application. I allow other organizations to disclose information related to me to Meadowvale Islamic Centre.

I also provide my consent to Meadowvale Islamic Centre in case this application is for a sick person, they want to verify about my illness with a doctor and hospital.

I also understand that Meadowvale Islamic Centre takes all necessary steps to protect privacy and personal information of the applicant. Due to any unfortunate circumstances, I will not hold Meadowvale Islamic Centre responsible for any loss of my personal information.

With my full consent I will not hold Meadowvale Islamic Centre liable or responsible for anything related to my Zakat, Sadaqah and Fitra application.

I truthfully declare that:

1. I am a Muslim
2. That I do not possess equivalent of current nisab & am eligible for Zakat / Sadaqah
3. Am not from banu hashim (syed)
4. I am applying for myself, (not on behalf of relative or friend)
5. I am applying for myself, (not on behalf of any organisation)
6. Money being requested is not for donation to a third-party
7. Money being requested is not for shrouding a body, kafn, or burial costs
8. Money being requested is not for repaying the debt of a deceased person

Applicant Signature: _____ Dated: _____