DONATION REQUEST ASSESSMENT FORM

PERSONAL INFORMATION

NAME: _____ DATE: _____

LAHAINA ADDRESS: _____

CURRENT ADDRESS: _____

EMAIL ADDRESS: _____ MOBILE NO.: _____

INSTRUCTIONS

Please check the approriate box that describes your current situation.

Were you and immediate family (spouse, parents, siblings, children) affected by the recent fire/disaster?	☐	No			☐	Yes
Were individuals other than your immediate family affected by the recent fire/disaster (cousins, aunts, close friends)?	☐	No			☐	Yes
How many people will benefit from the requested donation?	☐	1 person	☐	2-3 people	☐	More than 3
Did you lose your own home due to the wildfire?	☐	No			☐	Yes
Have you suffered other property damage or loss of belongings due to the wildfire?	☐	No			☐	Yes
Are there vulnerable family members, especially children, seniors, or disabled, who have specific needs due to the wildfire?	☐	No			☐	Yes
Do you need assistance with food, water, clothing, and personal hygiene?	☐	No			☐	Yes
How will the requested donation help you address the needs resulting from the fire/ disaster?	☐	Will help with long term needs	☐	Will help with needs for 1-6 months	☐	Will help with immediate needs
How has the wildfire affected your employment or source of income?	☐	Very short term (0-3 months)	☐	Temporarily (3 months to 1 year)	☐	Lost the ability to work(long term loss or long term unemployment)
Do you have any medical conditions or health needs that require attention or support?	☐	No medical or nursing assistance needed	☐	Chronic medical and nursing needs	☐	Urgent or immediate medical and nursing needs
Do you have any unique circumstances or challenges that you believe should be considered in assessing your donation request?	☐	No			☐	Yes
Explain your unique circumstance or challenges here:						
What are your short-term and long-term plans for recovery and rebuilding after the wildfire?						
FOR PNAMHI USE ONLY		**TOTAL**		**TOTAL**		**TOTAL**

REQUESTER'S NAME: _____ APPROVED BY: _____

SIGNATURE: _____ SIGNATURE: _____

DATE: _____ DATE: _____

For more information please contact:
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