Sunbeam
FAMILY SERVICES
1100 NW 14th St.
OKC, OK 73106
405-609-1904
Fax: 405-609-2953

(For Sunbeam use only)

Grandparents Raising Grandchildren (GRG) Holiday Program Application

The Oklahoma City Police Department, Oklahoma County Sherriff's Office, TRIAD volunteers, and Sunbeam Family Services' Caregiver Fundamentals Program would like to invite you to apply for this year's Grandparents Raising Grandchildren Holiday Program.

For consideration of service, please indicate if you meet the following eligibility requirements:

1. I live in ***Canadian, Cleveland, Logan,*** or ***Oklahoma County***. **Yes No**
2. I have required documentation (see page 3) **Yes No**
3. I (or my spouse) am the **primary caregiver and support** for a grandchild/grandchildren (18 years or younger)**, living exclusively at my residence, (*without the parent(s) in the residence*). Yes No**

Three 'YES' answers? Woohoo! YOU ARE ELIGIBILE.

Hmmm, Have a 'NO' answer? Please contact our office at 609-1904 to see how we may help.

Grandparent Information

Full Name: _____ **Date of Birth:** _____/_____/_____ **Age:** _____

Mailing Address:_____ _____ **Gender:** Male Female

City: _____ **Zip:** _____ **County:** Canadian Cleveland

Phone Number: _____ Logan Oklahoma

Alternate Phone: _____ **Email:** _____

This will be used to communicate for various events.

Total number of People in Household: _____ **Breakdown:** Adults _____ Children _____

Race: _____ **Ethnicity**: Hispanic/Latino Not Hispanic/Latino

Martial Status: Married Divorced Separated Single Widowed

Name of Spouse: _____ **Spouse Date of Birth:** _____

How did you learn about this program? _____

The Fine Print

Applications are processed on a FIRST COME, FIRST SERVED basis (GRG's 55+ are given priority).

Mail, fax or hand deliver to the address in the upper left corner.

****Applications will not be considered unless they are complete****

****Attach required documentation****

Application Deadline: Wednesday, October 31, 2018

Invitations for the GRG Holiday Party will be mailed out the week of November 12th

Grandchild(ren) Information

Through this program your grandchildren will have the opportunity to receive gifts valued at approximately $35. Gift cards will not be purchased.

Incomplete applications will not considered!

Grandchild One:

Grandchild's Full Name: _____ Male / Female **Date of Birth:** ___/___/____

Age: ____ **Grade:** ____ **Clothing Size:** _____ **Shoe Size:** _____

Style/Color Preference:_____

(Please be as specific as possible, so that our shoppers will be able to meet their needs. Ex: Do they like a certain superhero, character? Do they like a certain toy, musician, or hobby? What's their favorite color?)

Wish List:

1. _____ **3.** _____

2. _____ 4._____

Grandchild Two:

Grandchild's Full Name: _____ Male / Female **Date of Birth:** ___/___/____

Age: ____ **Grade:** ____ **Clothing Size:** _____ **Shoe Size:** _____

Style/Color Preference:_____

(Please be as specific as possible, so that our shoppers will be able to meet their needs. Ex: Do they like a certain superhero, character? Do they like a certain toy, musician, or hobby? What's their favorite color?)

Wish List:

1. _____ **3.** _____

2. _____ 4._____

Grandchild Three:

Grandchild's Full Name: _____ Male / Female **Date of Birth:** ___/___/____

Age: ____ **Grade:** ____ **Clothing Size:** _____ **Shoe Size:** _____

Style/Color Preference:_____

(Please be as specific as possible, so that our shoppers will be able to meet their needs. Ex: Do they like a certain superhero, character? Do they like a certain toy, musician, or hobby? What's their favorite color?)

Wish List:

1. _____ **3.** _____

2. _____ 4._____

Grandchild Four:

Grandchild's Full Name: _____ Male / Female **Date of Birth:** ___/___/____

Age: ____ **Grade:** ____ **Clothing Size:** _____ **Shoe Size:** _____

Style/Color Preference:_____

(Please be as specific as possible, so that our shoppers will be able to meet their needs. Ex: Do they like a certain superhero, character? Do they like a certain toy, musician, or hobby? What's their favorite color?)

Wish List:

1. _____ **3.** _____

2. _____ 4._____

Grandchild Five:

Grandchild's Full Name: _____ Male / Female **Date of Birth:** ___/___/____

Age: ____ **Grade:** ____ **Clothing Size:** _____ **Shoe Size:** _____

Style/Color Preference:_____

(Please be as specific as possible, so that our shoppers will be able to meet their needs. Ex: Do they like a certain superhero, character? Do they like a certain toy, musician, or hobby? What's their favorite color?)

Wish List:

1. _____ **3.** _____

2. _____ 4._____

Please add another page with the information below for each additional child.

Required Documentation

You must live in **Canadian, Cleveland, Logan, or Oklahoma County.**

You (or your spouse) are the primary caregiver and support for a grandchild/grandchildren (18 years or younger), living exclusively at your residence, **without the parent(s) in the residence.**

You must **include <u>current</u> school enrollment documentation and <u>at least one</u>** of the following (that must include current address and state with whom the child resides):

<u>Current</u> custody or guardianship letter <u>with</u> current utility bill.
Letter from church, doctor or daycare.
Medicaid letter
Free/reduced lunch letter
CASA letter

*All documents will be destroyed at the completion of this program. Then current updated documents will need to be submitted for future application.

○ Yes, I give my photo and information consent to the Grandparents Raising Grandchildren Program to photograph myself and my grandchildren.

○ No, I do not give consent. ***(Marking 'No' indicates that you will be responsible for relaying this wish to the media that may be present at events.)***

Name (Print): _____

_____ _____

Signature **(application will not be processed unless signed)** **Date**

INFORMATION RELEASE FORM

I hereby grant Sunbeam Family Services, Inc, its nominees, and agents and assign unlimited permission to use, publish, and republish for the purpose of advertising and trade and for such uses as it may determine, information and reproductions of my likeness (photographic and otherwise), my voice, my statements, my artwork, or my creative writing related to my work as a Sunbeam Family Services volunteer or related to the assistance I have received from Sunbeam Family Services, with our without identification of my by name.

I understand that my likeness, voice, artwork, creative writing, and/or statements could be used in or on, but not be restricted to, pamphlets, posters, billboards, booklets, brochures, bus shelters, bus benches, radio or television advertising, promotional videos, slide presentations, and other forms of printed, video, or audio material. I waive any right to prior approval for use of any likeness of me, my voice, artwork, creative writing, or statements made by me associated with the matters covered by this release.

I further waive any claim for compensation of any kind or nature for the use of any likeness of me, my voice, artwork, creative writing, or statements made by me associated with the matters covered by this release.

I hereby affirm that my participation is completely voluntary and that I have been in no way required to make public statements expressing gratitude to the agency. I understand that the agency will consider itself released from the responsibility to maintain confidentiality regarding information I may disclose to the public about my relationship with the agency.

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Grandparents Raising Grandchildren

Empowering Grandparents through support, resources, and more.

As a Grandparent Raising Grandchildren (GRG), you may have a lot of questions, concerns, and needs. Sunbeam Family Services empowers GRGs by offering support groups, school supply and holiday assistance, counseling services, and resources.

Grandparents Raising Grandchildren Support Groups

An inviting, confidential groups where you can talk with, listen to other GRGs, and get resources.

A **light meal** is provided for the families and **childcare** is provided (unless noted) so **RSVPs are necessary.**

Moore Support Group
in partnership w/ Fresh Start Community Church.
309 N Eastern Ave, Moore
Call Talena @ 405.609-6551 to ***RSVP***

Guthrie Support Group
Noble Ave Baptist Church
1210 W Noble, Guthrie 73044
Call Talena @ 405.609-6551 to ***RSVP***
last Tuesday of each month, 5:30—7:00 pm

Canadian County Support Group
in partnership with Youth & Family Services, Inc.
7565 E Hwy 66, El Reno 73036
Call Talena @ 405.609-6551 to ***RSVP***
2nd Monday of each month, 5:30-7:00 pm

Cleveland County Support Group
Generations Church, 1433 W Boyd, Norman
Call Facilitator Jacquie Jackson
405.919.4061 to ***RSVP***
3rd Wed. of each month, 6:30-8:00 pm

Oklahoma County Support Group
Northeast Church of Christ
4817 N Martin Luther King Ave, OKC
Facilitator Talena Ford 405.609.6551 ***RSVP***

Educare OKC Support Group
500 SE Grand Blvd, OKC 73129
NO CHILDCARE; Facilitator Linda Thele
Call 405.609.6551 to ***RSVP***
2nd Thurs. of each month, 11:30 am–1 pm

Sunbeam
1100 NW 14th, OKC, OK 73106
Call Talena @ 405.609.6551 to ***RSVP***
Last Monday of each month, 5:30–7:00 pm

(Facilities used for our GRG

Please see back side for more services & information

Sunbeam FAMILY SERVICES

Grandparents Raising Grandchildren

School Supply Program—Supplies and backpacks are available for your grandchildren to support you in providing what they need to be successful in school.*

Applications are available beginning in May each year.

Holiday Program—Sunbeam partners with TRIAD to help make your holiday a little brighter. Grandparents and grandchildren are our special guests at the GRG Holiday Party where gifts are presented to the grandchildren by Santa himself! *

Applications are available beginning in October each year.

Counseling—Our counselors are available to grandparents needing support and tools to manage the stress and concerns of raising grandchildren.

Resources—Do you have questions about assistance with groceries, clothing, kids' uniforms, etc? Please contact us so we can connect you with those that can help!

*Documentation is required to participate .

The project makes no distinctions on the grounds of race, color, gender, age, ancestry, national origin, religion, or disability. A portion of the project costs are met by state and federal OAA funds from Areawide Aging Agency and OKDHS Aging Services Division. There are no costs to the participants; however, donations are accepted. Suggested donation per services: Information Services, $1/activity; Access Assistance, $1/activity; Support Group, $2.50/meeting; Respite, $2.50/visit; School Supplies, $5/family; and Training Seminar, $5/seminar.

United Way Partner Agency

LIVE UNITED United Way

Providing help, hope and opportunity to people of all ages through
EARLY CHILDHOOD, **FOSTER CARE**,**COUNSELING** and **SENIOR SERVICES**

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1100 NW 14th Street
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405.528.7721