

Church's Partners Foundation

Application and Policy and Procedures on Disbursement

We're not just team members, we're a family and we always support each other. The Church's Partners Foundation was created to assist employees of Cajun Operating Company and employees of Church's Texas Chicken®/Texas Chicken™ franchisees who experience unexpected financial hardships.



Church's Texas Chicken® | Texas Chicken®
980 Hammond Drive, Atlanta, GA





Please fill out the below form so we can understand how to assist you. Your information is treated with the strictest confidence. Please find the Policy and Procedures on Disbursement, beginning on Page 7.

Employee's Personal Information:

First Name: _____ Last Name: _____

Position: _____ Date of Hire: ___ / ___ / ___ Time Employed: ___ Year(s) ___ Month(s)

Residence Address: _____

City: _____ State/Province: _____

Zip/Postal Code: _____ Country: _____

Home Phone: _____ Work Number: _____

Mobile Number: _____

Email Address: _____

Best method to contact recipient regarding additional information for grant: _____

Is the proposed recipient currently an employee of Cajun Operating Company ("Cajun") or an employee of a Church's Texas Chicken® or Texas Chicken™ franchisee?

Employee of Cajun Employee of Franchisee



For Cajun Team Members:

Who is the recipient's Manager: _____

Who is the recipient's Market Leader: _____

Restaurant #: _____

Restaurant City: _____

Restaurant State: _____

For Franchisee Employees:

Franchisee Owner or Entity Name: _____

Who is the recipient's Manager: _____

Who is the recipient's Market Leader: _____

Restaurant #: _____

Restaurant City: _____

Restaurant State: _____

Please describe the emergency: what happened, when it happened, and where it happened:

What is the total amount of funding being requested? \$ _____



How does the proposed recipient plan to spend any emergency assistance funds received through this program?

Is the emergency in one or more of the following categories?

Death* (Immediate family: spouse, parents, children, siblings) Fire Flood Homelessness Tornado

Other (Please describe) _____

If your claim is for property damage, please complete the questions below:

Do you personally own the damaged property? Yes No

If no, do you rent the property? Yes No

Was the property insured? Yes No

If yes, what is the deductible on the insurance claim? _____

Is there insurance that will cover any portion of loss from this emergency? Yes No

Has proposed recipient received or requested assistance from any other organization? Yes No

If yes, what is the amount \$ _____

***If the funds are for an immediate family member's burial service, please add:**

Name of Family Member: _____

Funeral Home Name: _____



Funeral Home Address: _____

Funeral Home Phone Number: _____

If grant is approved, where should we send the funds, if different from recipient's address?

Street Address: _____

City: _____

State/Province: _____

Zip/Postal Code: _____

Country: _____

For international requests, please furnish the below information to allow for wire transfer of funds:

Account Name: _____

Bank Name: _____

Bank Branch: _____

Account Number: _____

SWIFT CODE: _____

If funds are granted, may we contact recipient to follow up regarding status? Yes No



If you are filling out this form on behalf of the proposed grant recipient, please complete the below information:

Your Name: _____ Relationship to Recipient: _____

Does Cajun or a franchisee currently employ you?

If yes, please indicate:

Cajun employee: Franchisee employee:

Position: _____ Contact Number: _____

How did you hear about this program?

Has proposed recipient ever applied for or obtained assistance through the Foundation within the last 12 months?

Applied? Yes No

Obtained? Yes No

If yes, what date? _____

Amount received? _____



Authorizations, Releases, and Representations:

I certify that I have carefully read the Application and it is complete, true, and correct in all respects, to the best of my knowledge. I understand that any fraudulent representation or omission of any information is grounds for denial of assistance or return of funding. I authorize Church's Partners Foundation, Inc. to verify the information provided in this application. Notwithstanding this acknowledgment, I understand and agree that nothing contained in this Application obligates Church's Partners Foundation, Inc., and its affiliates to grant me assistance.

Requestor's Signature: _____ **Print Name:** _____ **Date:** _____

Church's Partners Foundation, Inc. reserves the right to ask proposed recipient to produce original and/or additional documentation verifying his/her identity.

or email to: ABrealond@churchs.com



Policy and Procedures On Disbursements

2023



DEFINITIONS:

1. **Budgeted Expenses:** Budgeted Expenses are those expenses associated with the ongoing administrative expenses of operating the Foundation and its programs.
2. **Disbursement:** Monies granted by the Foundation for financial assistance (via Grant or Scholarship).
3. **Foundation:** Church's Partners Foundation, Inc.
4. **Foundation Board:** The Board of Directors of the Foundation
5. **Foundation Board Members:** An elected member of the Foundation Board
6. **GAC: Grant Advisory Committee** that the Foundation shall appoint, which will act as a clearinghouse for review of Grant requests.
7. **Grants:** Grants are provided for the sole purpose of assisting company and franchise employees with financial aid in a time of crisis and catastrophe caused by events including, but not limited to: accident, crime, major medical emergency, or act of God. Exceptions to grant eligibility is subject to the approval of the GAC and the majority vote of the Foundation Board.
8. **Immediate Family Member** – Immediate family members of the proposed grant recipient include spouse, parents, children, and siblings.



Disbursement Policy & Procedures

- A. **General.** The Foundation is a non-profit corporation established solely *to provide support and assistance to the employees of Cajun Operating Company, to the employees of franchisees of Church's Texas Chicken® and Texas Chicken™.*
- B. **Grants.** Individual Grant requests are reviewed and considered by the Grant Advisory Committee (GAC) and each grant if approved, is awarded at the discretion of the GAC in an amount up to \$2,500. The GAC may award a grant in an amount greater than \$2,500 only if the vote is first approved by the GAC and majority vote by the Board. The award of a Grant must: (1) not jeopardize the Foundation's tax-exempt status; (2) comply with all applicable statutes, regulations, and Foundation policy; and (3) not benefit the campaign of any candidate for public office. Foundation Board Members are ineligible for the receipt of a Grant through the Foundation. Grants are provided for the sole purpose of assisting the Recipient with catastrophic financial issues, as described in the definition of "Grant" above. If a grant is requested outside of normal guidelines, it must first be approved by the GAC and receive a majority vote from the Board.
- 1. Eligibility for Grant.**
 - Must be actively employed by Cajun Operating Company or by a franchisee in the domestic or international *Church's Texas Chicken®/Texas Chicken™* system for a period of one year at the time of the Grant request.
 - If employee has received one Grant disbursement within the previous 12-month period, a second Grant to the same employee is subject to the approval of the GAC and the majority vote of the Foundation Board.
 - 2. Grant Advisory Committee.** The Foundation shall appoint a GAC, which will act as a clearinghouse for review of Grant requests. All Grant requests shall be reviewed by the GAC. Exceptions to policy guidelines in excess of \$2500 or frequency of less than 12 months must have GAC approval and the majority of the Foundation Board must approve the grant before an award can be made. The GAC is responsible for ensuring that there are sufficient monies to cover the disbursements and tracking the details of each grant for sharing twice a year with the Foundation Board.
 - 3. Temporary Emergency Assistance Application.** Requestors shall use the application attached at Appendix 1, which shall be uploaded to the Foundation website. For the requested Grant to be considered, the requestor must completely fill out the application. All Grant disbursements must have written justification suitable for auditing purposes.
 - 4. Responsibility of Board.** The GAC and the Board is charged with the responsibility of ensuring that the awarding of Grants is consistent with the purpose of the Foundation, falls within donors' intent in



donating to the Foundation, is reasonable and benefits the Recipient, will not jeopardize the Foundation's tax-exempt status, and complies with all applicable statutes and regulations.

- C. **Donations/Contributions.** Each donor must designate the fund that his/her/its gift is intended to benefit. Those funds are: the general fund (which includes Grants, Foundation Budgeted Expenses and any other amounts to be paid at the discretion of the Foundation Board) and the Grant fund. Such designations shall be described in the Foundation pledge card. The Foundation reserves the right to receive donations of property in accordance with IRS guidelines and to refuse such property donations at its discretion and such donor must designate the fund to which such donation of property is intended to benefit.
- D. **Budgeted Expenses.** The Foundation may expend available monies in accordance with the annual budget approved by the Foundation Board. Expenses incurred by Foundation Board Members in the course of conducting Foundation activities are reimbursable, subject to the budget, approval guidelines and bylaws of the Foundation. Any non-budgeted expenses incurred are subject to payment upon a vote of the majority of the Foundation Board.