

**Mike Rose's Auto Body  
Benevolence Program  
Recipient Application Form**

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

Daytime Phone: \_\_\_\_\_ Evening/Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

**Driver Information**

Do you have a current valid driver's license? Yes  No

If yes, please **attach a current DMV driving record report with application.**

Drivers license number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_ State: \_\_\_\_\_

Has your driver's license ever been suspended or revoked? Yes  No

Have you had any moving violations or criminal infractions in the past two years? Yes  No

Do you currently have auto insurance? Yes  No

Are there any other members of your household with a current valid drivers license? Yes  No

Can you drive a manual/stick shift transmission car? Yes  No

This event will be covered by the media, are you willing to appear on TV? Yes  No

**Employment Information**

Are you currently employed? Yes  No

If yes, please list the name, address and telephone number of your employer/supervisor.

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Please write at least a **one-page** narrative explaining why the lack of reliable transportation interferes with your current and future economic status, and how receiving this automobile will assist you in becoming self-sufficient. Attach a copy of your narrative to this application form, along with the DMV print out and return **all 3 items to Mike's Auto Body no later than NOVEMBER 25, 2011.**

Please fax back to us at 925-689-0991, mail to us at 2260 Via De Mercados, Concord, CA 94520, or scan and email to [benevolence@mautobody.com](mailto:benevolence@mautobody.com)