



The Castellano Foundation
Helping Hands to Those in Need

Veteran Family Holiday Assistance Nomination Form

The Castellano Foundation, bringing Holiday Joy to Veteran Families

Nominator Information

Please provide your contact details so we can reach you if needed.

Your Name: _____

Phone Number: _____

Email Address: _____

Nominee (Veteran Family) Information

Veteran's Full Name: _____

Branch of Service: _____

Home Address: _____

City: _____

Phone Number (if available): _____

Family Information

Number of Adults in Household: _____

Number of Children in Household (under 18): _____



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Reason for Nomination

Please explain why this veteran family would benefit from holiday assistance. Describe any recent challenges, such as financial hardship, health issues, or other circumstances.

Assistance Needed (Check All That Apply)

- Christmas Gifts for Children
- Holiday Food Box

Additional Details

If possible, please provide the children's ages and any specific interests to help us select appropriate gifts.



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Nominator's Consent

By signing below, I confirm that the information provided is accurate to the best of my knowledge, and I understand that this information will be kept confidential.

Nominator Signature: _____ Date: _____

Submission Instructions:

Please submit this form by December 7th, 2024 via email. For questions, contact Reyna Castellano at (505) 426-4148,.

Please email submissions to thecastellanofoundation@gmail.com