



“Neighbors Helping Neighbors”
P.O. Box 250, Westwood, MA 02090
westwoodcommunitychest.org

Application for Financial Award (Confidential)

Instructions:

- Applications **must be complete to be considered for an award** and **must include bills, or copies of bills, for payment directly to the vendor. **Please include "ACCOUNT #" and "PAY TO" address at the top of each bill you submit as well as on future bills.**
- Financial awards are given to fund **basic needs** expenses including but not limited to shelter, basic utility, food, necessary medical, clothing, transportation, and educational needs.

Please note:

- All applicants **must** be Westwood residents.
- Our mission is to provide short-term financial assistance.
- The awarding process is confidential and decisions/notifications are made within 2 weeks of receipt of an application except during July and August when decisions will be made once during each month.
- Financial awards are mailed directly to the company, utility, etc. **not the applicant.**
- There is a **financial award limit of \$1,000 per applicant per fiscal year.** An applicant may apply several times throughout the fiscal year until the limit of \$1,000 is reached for that awarding year. Fiscal year runs from July 1st to June 30th.
- There is a limit of **8** financial awards (up to \$1,000 in an award year and up to **8** financial yearly awards, not necessarily consecutive). After **8** financial awards, any further financial assistance would be considered long-term and beyond the mission of the WCC.
- An applicant experiencing extenuating circumstances may be eligible for additional funding at the discretion of the Awarding Committee.

MAIL APPLICATIONS TO:

Westwood Community Chest
PO Box 250
Westwood, MA 02090

QUESTIONS AND CORRESPONDENCE

- * westwoodcommunitychest@gmail.com
- * PO Box 250, Westwood, MA 02090
- * Voice Mail: (781) 366-0470



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APPLICATION FOR FINANCIAL AWARD

Today's Date: _____

APPLICANT INFORMATION

Name: _____ Phone: _____

Address: _____ Email: _____

Age: _____

Marital Status: Single Married Divorced Separated Widow Widower

Employment: Are you currently employed? No Yes Full Time Part Time

Occupation: _____

HOUSEHOLD

Number of Adults (not including you): # _____

Age: _____ Relationship: _____ Employed? Yes No Full Time Part time

Age: _____ Relationship: _____ Employed? Yes No Full Time Part time

Number of Children: # _____

Age: _____ Relationship: _____ Age: _____ Relationship: _____

Age: _____ Relationship: _____ Age: _____ Relationship: _____

TOTAL AMOUNT REQUESTED \$ _____

Please note: there is a **\$1,000 limit** per fiscal year (July 1 – June 30). **Bills must be attached!**

Rent/Housing \$ _____ Home Repairs \$ _____ (emergency repair)

Utilities \$ _____ Other \$ _____

Medical \$ _____

Please explain why the need exists: _____

What actions have already been taken to address this need now and in the future? _____

How did you hear about the Westwood Community Chest? _____

Has anyone in your household applied for a grant before? _____

Please be advised other town resources are available: Council on Aging (781-329-8799 - fuel assistance program and Food Pantry), Westwood School Department – bus fee waiver, In-town sports – fee waiver and Westwood Youth and Family Services – holiday giving program. Please refer to the resource sheet listed on our website for more information on how to contact these services.