



Westwood Community Chest  
PO Box 250; Westwood, MA 02090  
[www.westwoodcommunitychest.org](http://www.westwoodcommunitychest.org); 781-366-0470

## Application for Financial Award (Confidential)

### **INSTRUCTIONS:**

- Applications **MUST BE COMPLETE** to be considered for an award and **MUST INCLUDE A PHOTO ID**, and 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, 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.
- Financial awards are **mailed DIRECTLY to the company, utility, etc. NOT the applicant**.
- There is a financial award limit of **\$1250 per household per fiscal year**. An applicant may submit bills several times throughout the fiscal year until the limit of \$1250 is reached for that awarding year. (Fiscal years run from July 1st to June 30th).
- There is a **limit of 8** financial awards (up to \$1250 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 application 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

For faster service, you may fill out our online application at [www.westwoodcommunitychest.org](http://www.westwoodcommunitychest.org) or make use of the scanning service at the Westwood Public Library to scan this application and associated documents. Check in at the reference desk on the second floor.

### **QUESTIONS/CORRESPONDENCE:**

Email: [info@westwoodcommunitychest.org](mailto:info@westwoodcommunitychest.org)

Voicemail/text: 781-366-0470



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## APPLICATION FOR FINANCIAL AWARD

Today's Date : \_\_\_\_\_

### APPLICANT INFORMATION (\*must include Photo ID)

|                |  |              |  |
|----------------|--|--------------|--|
| <b>Name</b>    |  | <b>Phone</b> |  |
| <b>Address</b> |  | <b>Age</b>   |  |
| <b>Email</b>   |  |              |  |

|                             |                                 |                                         |                                             |                                        |
|-----------------------------|---------------------------------|-----------------------------------------|---------------------------------------------|----------------------------------------|
| Marital Status:             | <input type="checkbox"/> Single | <input type="checkbox"/> Married        | <input type="checkbox"/> Separated/Divorced | <input type="checkbox"/> Widow/widower |
| Are you currently employed? | <input type="checkbox"/> No     | <input type="checkbox"/> Yes, Full Time | <input type="checkbox"/> Yes, Part Time     | Occupation:                            |

### HOUSEHOLD:

Number of adults (not including you) \_\_\_\_\_

|     |  |              |  |                     |                             |                                         |                                         |
|-----|--|--------------|--|---------------------|-----------------------------|-----------------------------------------|-----------------------------------------|
| Age |  | Relationship |  | Currently employed? | <input type="checkbox"/> No | <input type="checkbox"/> Yes, Full Time | <input type="checkbox"/> Yes, Part Time |
| Age |  | Relationship |  | Currently employed? | <input type="checkbox"/> No | <input type="checkbox"/> Yes, Full Time | <input type="checkbox"/> Yes, Part Time |

Number of children \_\_\_\_\_

|     |  |              |  |
|-----|--|--------------|--|
| Age |  | Relationship |  |
| Age |  | Relationship |  |
| Age |  | Relationship |  |
| Age |  | Relationship |  |

**TOTAL AMOUNT REQUESTED \$** \_\_\_\_\_

\* Please note: There is a \$1250 limit per fiscal year (July 1 - June 30)

\* ***Bills must be included!***

|              |    |           |    |         |    |       |    |
|--------------|----|-----------|----|---------|----|-------|----|
| Rent/housing | \$ | Utilities | \$ | Medical | \$ | Other | \$ |
|--------------|----|-----------|----|---------|----|-------|----|



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Please explain why the need exists (detail here helps the voting committee to make a timely decision):

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

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Check off any of the following resources you take advantage of:

|                          |                                  |                          |                                            |
|--------------------------|----------------------------------|--------------------------|--------------------------------------------|
| <input type="checkbox"/> | Section 8 Housing Voucher        | <input type="checkbox"/> | Westwood Affordable Housing (WHA) unit     |
| <input type="checkbox"/> | Other affordable housing unit    | <input type="checkbox"/> | SNAP benefits (formerly Food Stamps)       |
| <input type="checkbox"/> | Westwood Food Pantry             | <input type="checkbox"/> | Discount Eversource rate                   |
| <input type="checkbox"/> | Fuel assistance                  | <input type="checkbox"/> | Financial coaching                         |
| <input type="checkbox"/> | HESSCO                           | <input type="checkbox"/> | Social worker (Rachel) at Council on Aging |
| <input type="checkbox"/> | Westwood Youth & Family Services | <input type="checkbox"/> |                                            |

Please provide information about other funding sources to which you have applied and any funds received. Include any discount or assistance programs you have applied to (or are a part of).

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Has anyone in your household applied for a grant before? \_\_\_\_\_



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How did you hear about the Westwood Community Chest?

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**Please be advised that other town resources are available:**

- Council on Aging: 781-329-8799 (fuel assistance program, Food Pantry)
- Westwood School Department bus fee waiver; in-town sports fee waiver
- Westwood Youth & Family Services (holiday giving program)

Please refer to the Resources section of our website for more information on these, and other, services: **[www.westwoodcommunitychest.org](http://www.westwoodcommunitychest.org)**

Revised: October 2025