

**APPLICATION FOR ASSISTANCE**

**CWA District 9 Disaster Wildfire Relief 2017**

As a CWA member, affected by the 2017 California Wildfires, you may be eligible for emergency financial assistance from the CWA District Disaster Wildfire Relief 2017 Fund. This emergency assistance is based on availability of funds and need. Please fill out the application below and return to your Local's Member Relief Fund Coordinator.

1. Name \_\_\_\_\_ Local \_\_\_\_\_

2. Home Address \_\_\_\_\_

3. Email Address \_\_\_\_\_

4. Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

5. List all dependent members of the household:

NAME	AGE	RELATIONSHIP
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

6. Please explain in detail, emergency financial assistance needed:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

7. Other extenuating circumstances you wish to share:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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**Reviewed By:**

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

**Recommendation:**

Should assistance from the Fund be approved?      Yes              No

Amount to be awarded: \_\_\_\_\_

Signature of reviewer: \_\_\_\_\_