



# BCHF

BC HOSPITALITY  
FOUNDATION

## Application for Assistance

The BCHF provides assistance to hospitality workers who are experiencing imminent financial need due to a health condition experienced by themselves or a member of their family. In order to be eligible for funding from our charity, an applicant must have explored all other potential avenues of funding. Whenever possible, we hope our help will enable individuals to recover and to return to work without the added burden of ongoing financial hardship.

---

***Eligible Beneficiary payments are made by cheque and paid directly to the beneficiary. If eligible, funds may take up to 5 days after the application is approved to be processed and delivered.***

**Date of Application    Name**

**Email**

**Phone**

**Address**

**Applicant's current place of employment**

**Applicant's current position**

**Age**

**Birth Date**

**Relationship**

**Name of Spouse or Partner**

**Dependent children ages**

## **Applicant's Employment information**

**Current Employer**

**Employer phone**

**Employer title**

**Please upload your resume**

**If you don't have a resume, please add work history for the past 5 years**

## **Medical information**

**Family or treating doctor**

**Phone**

**Address**

**Describe your medical condition**

**Supporting medical documents**

**Supporting medical documents**

**Supporting medical documents**

**Supporting medical documents**

**Additional - Information (please check all that apply)**

**Is this medical condition related to any of the below?**

**If this condition is related to a workplace incident, have you sought legal advice?**

## **Financial Information**

**FAMILY income PRIOR to accident / illness (monthly) \$\$\$**

**CURRENT FAMILY income (monthly) \$\$\$ - list all sources**

**Savings - \$\$\$**

**Assets \$\$\$ (RRSP, vehicle, property, etc.)**

**Other \$\$\$**

**Total FAMILY expenses \$\$\$- list**

**Housing**

**Are you currently receiving**

## **ASSISTANCE REQUESTED**

**In a few words, "what would you need the BC Hospitality Foundation to provide you?"**

**Amount requested \$\$\$**

**Cost of equipment \$\$\$ - if applicable**

**Additional notes/information or upload a cover letter.**

**Cover letter / additional  
information**

**HOW DID YOU HEAR ABOUT THE BC HOSPITALITY FOUNDATION?**