



Chefs de Cuisine (CDC) Association

San Diego, CA. Chapter 063

Relief Grant Application (COVID-19)

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone_ _____ Email Address _ _____

The following criteria is required to qualify for a COVID-19 Relief Grant

- Must be a local or ACF member in good standing and recently employed (or laid off) by a current foodservice establishment (please explain below, situation & needs)
- Funds are limited to hardship expenses only
- Fund budgets are set for a one-time check for the amount of up to \$500.00
- Application process must be completed by July 30, 2020
- Offer expires August 30, 2020 or until funds are depleted
- Provide documentation upon request to support your hardship (Financials, Employment Status, SSN)

Experiencing financial hardships due to COVID-19 Pandemic? If so, be specific, please explain your situation

Chef de Cuisine Association Information

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge. If this application leads to approval, I understand that false or misleading information on my application or interview may result in membership discharge.

These grants will be made on a first-come first served basis, subject to availability of funds.
All application information is confidential and will be used for eligibility approval and tax purposes only

Signature: _____ Date: _____