



55 Pleasant St., Suite 207, Newburyport, MA 01950

Application for the Help & Heal Mental Health Fund Grant

If you would like to apply for a Help & Heal Mental Health Fund Grant, please fill out this application form accurately and completely. If you have not already done so, you should review the Guidelines for applying for a grant first. By submitting this application, you agree that the information contained within it is true and complete to the best of your knowledge.

PERSONAL INFORMATION

Name: _____

Address: _____

City: _____

State/Province: _____

ZIP / Postal Code: _____

Telephone: _____

Email address: _____

Your MySupportForums.org username: _____

I have been a member of the forums for at least one year: YES NO

FINANCIAL & LIVING INFORMATION

I am employed: FULL-TIME PART-TIME or
 I am unemployed at this time

Annual employment income (usually, whether or not currently employed): \$ _____

Housing: OWN RENT LIVE WITH FAMILY

Monthly mortgage or rental payment if you own or rent: \$ _____

- I use Food Stamps, SSI, SSD or some other government assistance program.
- I have contacted local community and/or government resources for help.
- I have reached out to family and/or friends about needing financial assistance.

REQUEST FOR HELP

Requested amount: \$ _____ (\$599 or less)

Please describe the reason you are seeking this grant.
Please provide as many details as possible. Use an additional sheet if needed.

Your Signature

Date

Please mail to: Help & Heal Mental Health
55 Pleasant St., Suite 207
Newburyport, MA 01950

Or via email to: grants@helphealmentalhealth.org