
Request For ACCCEA Emergency Fund

Instructions

The classified employee or his/her representative completes this form, gathers documentation, writes a letter explaining circumstances, and submits all to the ACCCEA president.

Employee's Information

Name _____ Datatel ID _____

Address _____

Phone (home) _____ (Work) _____

Email _____ Fax _____

Amount Requested \$ _____

Check one:

_____ Temporary catastrophic situation

_____ Loss due to natural disaster

_____ Other

Signature of Employee or his/her representative

Committee Use Only

• Committee met on _____

• Request approved for _____

• Request denied

Funds not available

Documentation of circumstances inadequate or missing

Request does not meet "catastrophic" definition

Other _____

• Employee notified on _____

Vice President, Human Resources

ACCCEA President