

Emergency Assistance Common Approval Guidelines

Guidelines assume that campus has necessary funds in Campus Designated Funds and are not complicated by other circumstances.

Definitions

Primary Family: This is defined as either the employee themselves or someone that they have primary responsibility for. (son, daughter, spouse, etc.) Those listed in non-primary family may be included if they live with the employee, and the employee has primary responsibility for them.

Non-Primary Family: This is defined as not having primary responsibility for paying for healthcare, or do not have custodianship. In situations where grandparent has custodianship over grandchild this request would be moved to Primary family. (Grandchildren, Sister, Brother, Grandparents, Parents, etc.)

- **Requests Not-Funded: \$0**
 - Employee medical crisis if employee opted for no insurance
 - Requests with Executive Director Denial
 - Requests from employees who received Foundation Assistance in last 12 months. (Exceptions can only be made in situations where employee was awarded CDF \$200, and then suffers more serious occurrence. This 2nd request may only be funded up to \$800.)
 - Requests related to Healthcare deductible, co-pay, co-insurance, etc.
 - Requests related to hour adjustment due to census.
- **CDF Awards: \$200**
 - Car Repair/Payment
 - Utilities Shut Off/Payment
 - House Eviction
 - House repairs(when not created through natural disaster. E.g. Air-conditioner replacement, plumbing, etc)
 - Non-life threatening medical emergency: Must be for Primary family only
- **Foundation Awards: \$500**
 - Life Threatening Medical Emergency for non-primary family
 - Death of a Non-primary family member(Should only be awarded if applicant specifies that they have payment responsibility)
- **Foundation Awards:\$1000**
 - Life Threatening Medical Emergency for Primary family-(Cancer, Domestic Violence, etc.)
 - Death of an immediate primary family member
 - Catastrophic loss of property due to natural disaster-(Fire, flood, tornado, earthquake, etc.)

The Foundation reserves the right to limit the number of employees eligible to receive Emergency Assistance. Questions surrounding this policy may be directed to the Trilogy Foundation or Employee Services.

Policy Name:	Emergency Assistance	Effective Date:	6-15-15
Review Date:	12-15-15	Revised Date:	6-15-15
Policy Approved:	SVP. Employee Services & Foundation	Approval Date:	6-15-15

Forms:	Emergency Assistance Request Form
Key Words:	Emergency Assistance, Foundation
Short Description:	The Foundation believes in helping our employees through times of difficulty.

