



Hardship Fund Policy

Mission Statement:

AFSCME Local 920 Hardship Fund provides assistance for Local 920 Members in good standing with short-term financial relief in the event the member is experiencing an immediate, severe financial hardship beyond their control.

Qualified events fall into five main categories:

- **Natural disasters:** These can include floods, lightning strikes, house fires, tornado strikes, and wind damage resulting in loss to or use of a primary residence.
- **Illness or injury:** Examples car accidents, emergency room visits or other medical expenses.
- **Death:** This can be a member's death or the death of a members' immediate family as defined by the Union Contract.
- **Military deployment:** Unexpected costs associated with a member's deployment or the deployment of an immediate family member.
- **Catastrophic or extreme circumstances:** These are defined as events that happened within 60 days of the application date, does not fall into any of the categories above, and result in unexpected expenses above and beyond normal living expenses.

Examples of incidents that do not qualify:

- Loss of household income due to a decrease in hours or overtime, the loss of a job, a divorce or the loss of child support and/or any supplemental income.
- Credit card bills, vehicle purchases or repairs, home foreclosures.
- Expenses incurred due to lack of homeowners insurance.
- Accumulated financial obligation(s) from spending beyond means.
- Funding for continuing education including books, tuition, laptops, internet service and associated expenses.
- Debt consolidation, litigation, bail, garnishments, child care or other expenses deriving from non-emergency situations.
- Non-essential/luxury items such as cable TV, cell phones, laptops, computers, and other electronics.
- Wage garnishments, disconnection notices or eviction notices.

While some of the above items could be a result of a financial hardship, they are not the cause. Application for assistance must describe the circumstances that make it impossible to meet normal living expenses and in detail explain why immediate help is needed.

The Hardship Fund is not a Strike Fund and must not be used for that purpose.

The Hardship Committee:

- Committee members must keep all applicant information private.
- For a term of one year, four (4) members shall serve on the Hardship Committee, preferably one (1) from OLF bldg., one (1) from GRB bldg., one (1) from HLB and (1) from a district office. Of the four (4) member's, one (1) will serve as the committee chair.
- When reviewing applications and in the case of a tie vote of the Hardship Committee, the Local's President will have the deciding vote.
- If there are no volunteers from the locations mentioned, the Hardship Fund Committee members will be appointed by the President with an approved vote from the Executive Board (E-Board). With the exception of the Local's President, no member of the E-Board may serve on the Hardship Fund Committee.
- A quorum of three (3) members is required to conduct business.
- If a committee member fails to review and respond to two (2) consecutive Hardship Fund Applications without notice to the Local 920 Hardship Fund Chairperson, the committee member will be replaced.
- The Committee must meet within one week of receipt of a Hardship Application to formulate a decision on the application. When meeting in person is not an option, members should meet via conference or video call (Skype, FaceTime, Messenger, Goto Meetings). Discussing and reviewing applications by email is not an option.
- Committee members must have daily access to a personal email address to receive application information, correspondence and application review meeting information from the Hardship Committee Chair. The state (MDH) email system is not to be used for sending/receiving applications.

Eligibility Guidelines for Funds:

- Must be a member in good standing, including members whose termination is being grieved by the union.
- Have suffered an emergency or catastrophic situation that has caused temporary, sudden and non-recurring financial shortfall (e.g., natural disaster, immediate family crisis, acute illness or injury, etc.).
- Are unable to meet immediate, essential expenses related to the above.

Amount(s) of Available Assistance to Individuals:

- The total hardship funds available is based upon the annual amount budgeted for the hardship fund.
- Amount(s) awarded will be up to 50% of actual expense not to exceed \$250.00 per award.

- A member may receive one (1) hardship award within a twelve (12) month period, up to a maximum of three (3) hardship awards in a lifetime.

The process to apply for assistance:

- A member completes a Hardship Fund application – available to download from our website. www.local920.org. Submit application to the mailing address below.
- An application must include documentation such as copies of an invoice or utility bill which documents your hardship need. The Hardship Committee reserves the right to request additional documentation.

Eligibility review/distribution of assistance:

- The application for assistance, with accompanying documentation, shall be responded to within seven (7) business days of application receipt and the release of funds as soon as possible.
- The Hardship Committee will determine whether any monies are awarded. The Hardship Award will only be paid directly to the creditor (utility, landlord, etc.) with a copy of the documentation provided at time of application. Funds will not be paid directly to a member.
- Referrals for other assistance will be provided if available.

Funding sources for the Fund:

- Local 920 annual budget item

Mailing Address

AFSCME Local 920
P.O. Box 3703
101 South Fifth Street Suite 150
Saint Paul, MN 55101

website: www.local920.org



Hardship Fund Application

Mailing Address

P.O. Box 3703
101 South Fifth Street, Suite 150
Saint Paul, MN 55101
<http://www.local920.org>

Name: _____ Phone: _____
Last First Initial

Home Address: _____
No. and Street City State Zip

Email Address: _____

What Assistance is needed: _____
Number of people in household _____

Please give a short synopsis of the circumstances that contributed to the hardship situation:

Signature _____ Date: _____

Directions for applying for a Hardship Fund Grant:

1. Fill out the application in its entirety, including phone number and email.
2. Include with your application documentation of need: invoice, utility bill, etc.
3. Mail the application to the address listed at the top of the application. On the mailing envelope, in the lower left hand corner write the words: **ATTN: Hardship Fund Committee**