



# Application for Personal Assistance



By filling out the following information, you are officially applying to receive personal assistance from SMS Cares. The questions below will be reviewed by the SMS Cares committee to help determine if your request will be approved or declined. Please ensure you have read and understood the eligibility requirements before you apply and submit your application.

NAME (MR/MS) \_\_\_\_\_ LAST \_\_\_\_\_ FIRST \_\_\_\_\_ MI \_\_\_\_\_

ADDRESS \_\_\_\_\_ Payroll I.D. # \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

DAYTIME PHONE ( \_\_\_\_ ) \_\_\_\_\_ MOBILE PHONE ( \_\_\_\_ ) \_\_\_\_\_

COMPANY ☐ Block by Block ☐ CSC ☐ SMS ☐ WTC Ventures (*U.S. employees only*)

LOCATION NAME AND # \_\_\_\_\_

POSITION \_\_\_\_\_ LENGTH OF EMPLOYMENT \_\_\_\_\_

TYPE OF ASSISTANCE ☐ Personal Tragedy ☐ Natural Disaster

Does the employee have an e-cash card or total pay card? \_\_\_\_\_ Yes \_\_\_\_\_ No

Describe the cause and the resulting damage to your home and belongings, and the current situation of you and your family that make it necessary for you to seek assistance.

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What are your most immediate and pressing needs for assistance? (Please be specific; i.e. food, clothing, temporary housing, etc.)

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What amount of financial assistance do you estimate that you need? (Please be specific; i.e. how much money do you need for any of the above listed needs.) \_\_\_\_\_

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How can we get in touch with you and or get assistance to you?

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Did you have homeowner's or renter's insurance? ☐ Yes ☐ No

Did it cover the type of damage you sustained? ☐ Yes ☐ No

Have you filed a claim with your insurance agency? ☐ Yes ☐ No

Have you requested assistance from any local, state or federal organizations, such as:

☐ Red Cross? ☐ FEMA? ☐ Church/Synagogue/Mosque?

☐ Other social service agency for assistance? Who? \_\_\_\_\_

Manager Name \_\_\_\_\_ Manager Phone Number \_\_\_\_\_

Application completed by \_\_\_\_\_ Date \_\_\_\_\_

## HOW TO SUBMIT

Submit to your Manager and have them email it to [smscares@smsholdings.com](mailto:smscares@smsholdings.com)

OR

**Mail to** SMS Cares Fund  
7135 Charlotte Pike, Suite 100  
Nashville, TN 37209

OR

**Fax to** 1-866-216-9065  
Attn: SMS Cares Fund