

## SLF HARDSHIP GRANT

### Application Form for Members of SLF Affiliated Unions/Association

The SLF Hardship Grant aims to provide assistance to low-income union members in the event that the member suffers hardship arising from one of the following circumstances which is of a non-industrial nature:

- (i) Death
- (ii) Total and permanent incapacity
- (iii) Chronic medical condition
- (iv) Registered fire or flood victim

Union member must meet the following income criteria in order to be eligible for the grant:

- Total Monthly Gross Household Income of \$1,800 and below; OR
- Per Capita Income of \$500 and below if monthly gross household income exceeds \$1,800

Please note:

- (a) Complete all relevant sections in this form. Please use block letters and write legibly. Indicate "N.A." if not applicable.
- (b) Submit completed signed form and relevant supporting documents to:
  - Union that member belongs to (for Ordinary Branch members)
  - NTUC Members' Hub (for General Branch members), 1 Marina Boulevard, B1-01, NTUC Centre, Singapore 018989
- (c) Please allow about 4-6 weeks of processing time. Your Union or NTUC Membership Department will inform you of the outcome of your application.
- (d) Approval of hardship grant is subject to meeting the eligibility criteria and reviewed on a case by case basis.

Reason For Hardship Grant Application <i>(Please tick <input checked="" type="checkbox"/> only one)</i>	Required Supporting Documents – To avoid delay in processing, please ensure all required documents are submitted together with the application form.	
<input type="checkbox"/> Death of Union Member	<ul style="list-style-type: none"> <li>• Death Certificate</li> <li>• Marriage Certificate (if applicant is spouse) or Birth Certificate (if applicant is child / parent)</li> </ul>	Please note that Applicant may be requested to submit other supporting documents if necessary, for verification and audit purposes.
<input type="checkbox"/> Chronic Medical Condition of Union Member	<ul style="list-style-type: none"> <li>• Medical Memo / Report from doctor</li> </ul>	
<input type="checkbox"/> Total & Permanent Incapacity of Union Member	<ul style="list-style-type: none"> <li>• Medical Report from doctor</li> </ul>	
<input type="checkbox"/> Fire or Flood Victim	<ul style="list-style-type: none"> <li>• Police Report</li> </ul>	

#### (A) PARTICULARS OF AFFILIATED UNION / ASSOCIATION MEMBER

Full Name of Union Member: (as in NRIC / FIN)		Gender Female / Male *																				
NRIC / FIN No:	<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> </table>																					Marital Status: Single / Married / Divorced / Separated / Widowed *
Home Address:																						
	Postal Code:	<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> </table>																				
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Name of Employer:																						
Member working at the point of hardship grant application?	Yes / No *	If member is not working currently, please state the date member has stopped working: <table border="1" style="display: inline-table; border-collapse: collapse; margin-left: 10px;"> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> </table>																				

#### (B) PARTICULARS OF MEMBER'S SPOUSE IF MARRIED

Full Name of Spouse: (as in NRIC/ FIN)		NRIC / FIN No:																				
Mobile No:	<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> </table>																					Occupation:
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\* delete accordingly

