



Other Event Worksheet

This Worksheet has been created to assist you in collecting data to complete a HOPE Fund request for an Other event. You must have ALL required data before beginning the application. For Kindred Management - The online application does NOT allow you to save it and return at a later time.



- Employee First/Last Name, Title, Personnel Number, and Home Address

- Employee Status/Length of Service

- Date of Hire and current employee status (i.e., full time, part time, per diem) _____
- Date(s) of employee leave in the past 120 days _____



- Date of Event _____
- Event type – explain in detail: _____

- Relationship to employee. _____
- Is/was the individual a contributor to the household? Yes No
- Is individual a legal dependent and living in household? Yes No
- Is the employee financially responsible for household expenses? Yes No
- Did/does the individual live in the household? Yes No
- Number of financial contributors ____, number of legal dependents ____
- If this is a Homelessness Event, where is the Employee staying? _____
- Reason for financial hardship caused by the event and any out of pocket costs? _____

Kindred Management: Do not submit this form to the HOPE Fund. Applications MUST be submitted electronically through the HOPE Fund application found on KNECT.

Gentiva Employees: Please submit worksheet to your Branch Manager who will fax worksheet/documents to 877-737-1924.

Please fax all supporting documentation to 877-737-1924.