



## Death Event Worksheet

This Worksheet has been created to assist you in collecting data to complete a HOPE Fund request for a Death 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.

### *Basic Information...*

- 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 \_\_\_\_\_

### *Additional Information...*

- Date of Death \_\_\_\_\_
- Name of Deceased \_\_\_\_\_
- Relationship to Employee \_\_\_\_\_
- If the deceased is the employee, provide name that the check should be made out to.  
\_\_\_\_\_
- Did deceased live in the household?  Yes  No
- Was deceased a financial contributor to the household?  Yes  No
- Is employee financially responsible for deceased?  Yes  No
- Will funeral costs be shared?  Yes  No If yes, please explain what will be shared.
- 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.