

CALIFORNIA SCHOOL EMPLOYEES ASSOCIATION

Emergency Assistance Application

(Please Type or Print)

A P P L I C A N T	APPLICANT'S NAME (LAST, FIRST, M.I.)			
	STREET ADDRESS			
	EMERGENCY ADDRESS			EMERGENCY TELEPHONE
	CITY	STATE		ZIP CODE
	HOME TELEPHONE	OFFICE TELEPHONE	CSEA NUMBER OR	SOCIAL SECURITY NUMBER
	CHAPTER NAME & NO.			
	TYPE OF DISASTER (earthquake, fire, flood, etc.)			DATE

- 1) Evacuated? YES ☐ NO ☐ If yes, please complete page 2, Evacuation Questionnaire
- 2) Complete loss? YES ☐ NO ☐

Attach verification/statement that an **official agency** deemed your primary place of residence **uninhabitable** and partially or temporarily condemned.

AGENCY (such as Fire, Police or City/County Building Department)

DEPENDENT INFORMATION

Do you have dependent children in the home under the age of 18? ☐ YES ☐ NO

If yes, please indicate number of children and ages: _____

If your emergency involves complete loss and you are unable to return home due to damage, completion of the attached evacuation questionnaire is not necessary. Proof of loss is required.

I certify under penalty of perjury that the information furnished in this application is true and correct. I understand that any misstatement or falsification may result in my disqualification.

APPLICANT'S SIGNATURE	DATE
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RETURN TO: CSEA, Attn: Emergency Relief Program, 2045 Lundy Ave., San Jose, CA 95131
OR Fax to: (408) 432-6249 OR Email to *humanitarian@csea.com*
(MUST BE SUBMITTED WITH IN 90 DAYS OF CATASTROPHIC EVENT)

FOR OFFICE USE ONLY

Application Approved? ☐ YES ☐ NO Date _____

Eligible for STJ? ☐ YES ☐ NO If yes, added to STJ list? ☐ YES Date added: _____

Email

Emergency Application Evacuation Interview Questionnaire

(to accompany CSEA Emergency Application for Evacuations)



1. Date evacuated and date returned to home:

2. Names and ages of people in the home that evacuated (Also list pets evacuated):

3. Where did you evacuate to? Who did you stay with?

4. If you went to a hotel, what was the cost?

5. Damage to home? YES ☐ NO ☐ If yes, describe damage and approximate repair costs:

6. Other losses and and costs (estimated):

7. Estimated total of your losses and costs:

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