## Dolores E. Ashton Goodwill Fund Application Form

Goodwill Fund Benefits founded by Darlene Coor, are available to all members in good standing. This application will be subject to review & completion of such does not guarantee receipt of funds.

<u>Member Name</u>	<u>Department</u>	<u>Extension</u>	<u>Date</u>
ETIREMENT BENEFIT ONLY:			
etirement Applicant Please Comp etirement date.	plete Below: *You must apply	of or this benefit at le	east 14 days prior to your
Last Day of Work ~ Retirement I	Date:		
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pplicants mailing address:			
y signing above, applicant verificonsequences set forth by the Con	es that all information is com stitution of the Benefit Fund	pletely true, and any Staff Association.	y falsification can result in
Exec	eutive Board Representat	ive Complete Bel	ow
Application Approved	Application Der	nied Name of the last of the l	Application Pending
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xecutive Signature:	-4165	Date:	
<u>pplicant Signature for Received (</u>	Uneck:		<del></del>

<sup>\*</sup>Goodwill Fund payout will be during final day with the Fund or mailed to respective mailing address provided on form. The BFSA would like to thank you for your service and wish you the best on your new chapter. Congratulations and happy Retirement!