

Staff & Faculty Emergency Fund (SFEF) Application

1. Click on the *Staff & Faculty Emergency Fund (SFEF) Application* link to start the form.
2. You will be prompt to log in to Adobe Sign.
 - a. In the *email address line*, type in your full SaLink email address, including @csus.edu (ex. xxxxx@csus.edu) (see figure 1. for the Adobe Sign-In screenshot).
 - b. Click the **Continue** button.

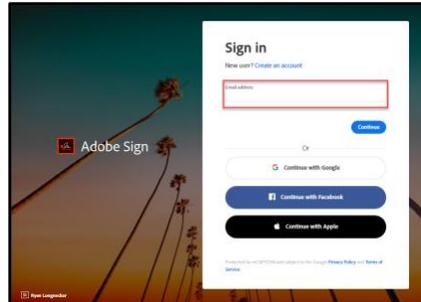


Figure 1. Adobe Sign-In screenshot

3. Once on the *Adobe Sign Send* page (see figure 2. for the *Send* page screenshot)
 - a. In the *Instruction* field, it is important to Click **More** in this section for information about this process. Please carefully review eligibility criteria and have copies of supporting documentation you plan to attach before starting the application.
 - b. The *Recipient* field auto-populates in your email address, and you do not need to change this information.
 - c. The *CC* field auto-populates in the Human Resources email address, and you will not be able to change the email.
 - d. The *Document Name* field auto-populates in the document's name, and you do not need to change this information.
 - e. The *Message* field auto-populates an important message for you to read. Please read the information carefully and follow the instructions provided.
 - f. The *Files* field allows you to attach supporting documents to be submitted with the application.
 - i. Staff & Faculty Emergency Fund Application is auto-populated in, and you will be required to fill in the application in Step 4.
 - ii. Please attach a document to Justify the Amount Requested (required). It is highly recommended that you have the supporting documentation ready to be attached before proceeding to the next step.

*Click **Add File** and follow the steps to attach the required document. Personal information should be redacted or blacked out (e.g., social security numbers, patient IDs, account numbers, etc.) on your supporting documents.*
 - iii. Adding additional documents is optional. Suppose there are additional documents; attach those in the *Additional Document* fields. Click **Add File** in the corresponding row to add other documents.

g. Click the **Send** button to route you to the application.

The screenshot shows the Adobe Sign interface for sending a document. The page title is "ABA_HR Staff & Faculty Emergency Fund (SFEF) Application Workflow". The navigation bar includes "Home", "Send", "Manage", "Reports", and "Group".

A **INSTRUCTION:** Please carefully review eligibility criteria and have copies of supporting documentation you plan to attach prior to starting the application. A "more" dropdown menu is visible to the right.

B **Recipients**

Signer *
Myself (selected) | Email (dropdown)

C **CC** | Hide
aba-svc-signhr@csus.edu x

D **Document Name ***
Staff & Faculty Emergency Fund Application

E **Message ***
Please carefully review eligibility criteria and have copies of supporting documentation you plan to attach prior to starting the application process. The type of documents will vary depending on individual circumstances but should confirm that you have a financial hardship AND verify the amount of money you are requesting (e.g., a utility bill or invoice). Personal information should be redacted or blacked out (e.g. social security numbers, patient IDs, account numbers, etc.) on your supporting documents.

F **Files**

- i Staff & Faculty Emergency Fund Application * | ABA_HR Staff & Faculty Emergency Fund Application Template
- ii Please Attach a Document To Justify the Amount Requested * | Add File
- iii (Optional) Attach Additional Supporting Document 1 | Add File
- (Optional) Attach Additional Supporting Document 2 | Add File

G **Send**

Figure 2. Send page screenshot

4. Once on the form, click the yellow **Start** tab to navigate to the required fields and type in your information (see figure 3. for the Staff & Faculty Emergency Fund (SFEF) Application screenshot).

The screenshot shows the Adobe Sign interface for the Sacramento State Staff & Faculty Emergency Fund (SFEF) Application. The form is titled "Staff & Faculty Emergency Fund (SFEF) Application" and includes a "Start" button highlighted in a yellow box. The form fields are as follows:

Employee Name	Employee ID	Department
Pakou Woo	*	*
Mailing Address	City, State & Zip Code	Contact Phone Number
*	*	*
Sacramento State Email Address	Alternate Phone Number	
pwoo@csus.edu		
Cause of Temporary Emergency* (Please CHECK at least one of the following options)		
<input type="checkbox"/> Death of an immediate family member		
<input type="checkbox"/> Disaster (fire/flood/earthquake/COVID-19, or other Qualified Disasters per IRS Code Section 139)		
<input type="checkbox"/> Serious illness or critical injury		
<input type="checkbox"/> Other:		
Reason for Request – Check all that apply* (Please CHECK at least one of the following options)		
<input type="checkbox"/> Emergency temporary housing assistance		
<input type="checkbox"/> Unexpected medical expenses not covered by insurance		
<input type="checkbox"/> Unplanned critical travel and transportation costs		
<input type="checkbox"/> Temporary assistance with food insecurity		
<input type="checkbox"/> Emergency personal or "incidental" expenses, such as clothing, hygiene items, etc.		
<input type="checkbox"/> Unplanned or additional child and/or adult care expenses		
<input type="checkbox"/> Other:		
Describe your TEMPORARY EMERGENCY in detail. How did the "Cause of the Temporary Emergency" create a financial hardship? When did it occur?		
*		
Amount Requested (MAX: \$1,000; Must provide documentation to justify amount requested)		
\$ *		
Certification		
I certify that the information provided in this application and supporting documents is accurate, my financial hardship is genuine, and that I have not previously been reimbursed for claimed expenses. I understand any money received is a one-time award and may be reported as taxable income. I will apply all money received toward debts related to my temporary emergency. I certify that I have read the SFEF guidelines and understand information from my application and supporting documents will be reviewed by the SFEF Committee for consideration. I understand completion of this application does not guarantee funding and that if needed, I will address any concerns or questions related to my request. Furthermore, I understand that all decisions rendered by the SFEF Committee are final.		
Employee Signature	Date	
* Click here to sign	Mar 1, 2021	

Mail original paper applications and copies of supporting documents to:
OFFICE OF HUMAN RESOURCES
6000 J Street

Figure 3. Staff & Faculty Emergency Fund (SFEF) Application screenshot

5. Once you tab to the *Signature* field, the signature screen will display to provide signing options (see figure 4. for applying signature screenshot).
 - a. Select the signing method by clicking on **Type**, **Draw**, **Image**, or **Mobile**, and follow the instructions displayed to complete this process.
 - b. After completing the signature process, click the **Apply** button to apply the signature on the form.

The screenshot shows the Adobe Sign signature screen. It features a toolbar with four options: Type, Draw, Image, and Mobile. Below the toolbar is a red Adobe Sign logo and a text input field labeled "Type your signature here". At the bottom right, there are "Close" and "Apply" buttons, with the "Apply" button highlighted in a red box.

Figure 4. Applying signature screenshot

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6. Once your signature is applied, click the blue **Click to Sign** button at the bottom of your screen (see figure 5. the *Click to Sign button*).



Figure 5. Click to Sign button screenshot

7. A thumbnail of the confirmation message will display. (see figure 6. Confirmation message screenshot) This completes your portion of the Staff & Faculty Emergency Fund Application.

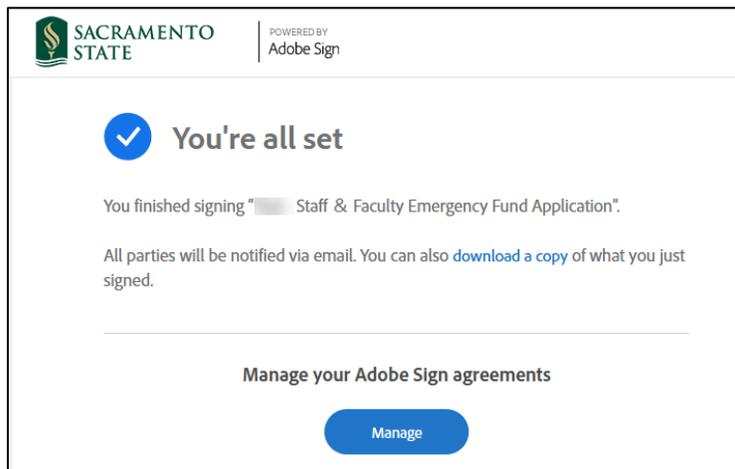


Figure 6. Confirmation message screenshot

Please note:

The SFEF Committee will review and approve requests in the order they are received from staff and faculty. The SFEF Committee members will not be given the applicants' names but rather only the reason(s) for the request and supporting documentation. If additional information is needed to make an award determination, Human Resources will reach out to the applicant and relay information to the SFEF Committee.

Applicants will be notified in writing of the SFEF Committee's decision. In most instances, applicants will be notified within seven working days of receiving all necessary and required information.

Approved funds will be paid by check and mailed to the address included on the application.

For additional information, please refer to the Frequently Asked Questions.