

## EMERGENCY GRANT APPLICATION REQUIRED DOCUMENTATION CHECKLIST

Before starting your application, please first speak to your market center leadership or KWRI HR department/Heart Fund representative. **We can't move forward with a grant until we have their commitment to support your request.** Please also have the following documentation available to upload into your grant application. **Note:** If any documentation is in a language other than English, you must provide a **certified English translation** notarized by a U.S. Notary Public.

### EMERGENCY FUNERAL GRANT EVENT DOCUMENTATION

- Confirmation that the deceased was either a **KW Associate**, or their **spouse/domestic partner**, or a **legal dependent** of an associate or their spouse/domestic partner:
  - Most recent tax return listing the deceased as a spouse/domestic partner/dependent, **OR**
  - Court documentation recognizing the deceased as a dependent (e.g. custody agreement, guardianship, or similar legal status)
- Receipts/invoices for essential funeral expenses (**excluding** headstone, reception, flowers, etc.) with **grant applicant listed as the payor**
- Most recent bank statements confirming less than \$60,000 in combined bank balances
- Death certificate, if available
- Summary of event (relationship to deceased, cause of death, etc.)
- If applicant or deceased is a domestic partner, a *completed* and *notarized* [Affidavit of Domestic Partnership](#)
- A copy of the deceased's life insurance policy, if they had one

### EMERGENCY DOMESTIC VIOLENCE GRANT EVENT DOCUMENTATION

- Documentation confirming police protective order or registration with local domestic violence organization
- Most recent bank statements confirming less than \$60,000 in combined bank balances
- Summary of event leading up to the need for an emergency grant

### EMERGENCY MEDICAL TRAVEL GRANT EVENT DOCUMENTATION

- Estimates or receipts for medical travel (life-flight, etc.)
- Most recent bank statements confirming less than \$60,000 in combined bank balances
- Summary of event leading up to the need for an emergency grant
- Completed and signed [Physician's Statement](#). **Physician must fax the completed form to KW Cares.**
- If patient is a domestic partner, a *completed* and *notarized* [Affidavit of Domestic Partnership](#)

## EMERGENCY HOUSING DISASTER GRANT EVENT DOCUMENTATION

Grants are available for disasters of the applicant's **primary residence** only. The IRS defines a primary residence as the home in which a person resides most of the time (183+ days per year), and the address must be listed on the person's driver's license or car registration, voter registration card, Federal/state tax returns, and on file with the U.S. Postal Service.

- Incident report from emergency service agency, such as fire department, if applicable
- Most recent bank statements confirming less than \$60,000 in combined bank balances
- Summary of event leading up to the need for an emergency grant
- Insurance declarations page. Applicant must first file an insurance claim. KW Cares cannot duplicate assistance provided by another source.

**The primary recipient** of an Emergency Grant must be a **KW associate**, or their **spouse/domestic partner**, or a **legal dependent** of an Associate or their spouse/domestic partner, or the **Market Center or family member who is the payor of a KW Associate's funeral**. We use tax forms to verify spouse and legal dependents. The IRS requires couples who are married (or "considered married" in states where Common Law marriage is legal) to file as married filing jointly, or married filing separately, and KW Cares follows these requirements. Acceptable documentation to prove legal guardianship of dependents includes listing the dependent(s) on the applicant's most recent tax return, OR court documentation listing name(s) of dependent(s) (e.g. custody agreement, guardianship, or similar legal status).

***KW Cares grants are intended to provide a degree of assistance for essential expenses related to an emergency event, not to fully cover every expense.***

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