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| **Request For MISA Emergency Withdrawal** |  |

**I, CMS#** request approval to withdraw

 funds from MISA Account # for the following emergency withdrawal.

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| **QUALIFYING EMERGENCY WITHDRAWAL for the following reason:** |  |
| * Necessary medical expenses
 | $ |
| * Expenses to avoid eviction of the participant from the participant’s residence
* Expenses to avoid foreclosure of the participant from the participant’s residence
 | $ |
| * Essential expenses to maintain or sustain employability after a job loss, such as phone and living expenses
 | $ |
| * Expenses related to transportation for employment, including car payments, repairs, bus passes, gas, & car insurance when other transportation options are unavailable
 | $ |
| * Childcare expenses (see policy for further clarification)
 | $ |
| * Home addition and expansions
 | $ |
| * Unexpected household repair impacting program participation
 | $ |
| * Urgent household moves or significant life changes impacting participation
 | $ |
| Exact Amount to be Withdrawn | $ |
| Other Requirements Met (if applicable)* If qualifying asset has already been purchased, attach documentation
 |
| **Specific Purchase:****Justification of Need:****Reason for Exceptions & Special Cases (if needed):** |

Vendor\*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Purchase: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address

Phone # or email address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**The asset or investment purchase detailed above is approved for funding and/or reimbursement.**

Trainer Approval Executive Approval

**\*(If more than one vendor, complete another form)**

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| **PARTICIPANT FILE CHECKLIST – DOCUMENTATION NEEDED**Vendor Documentation & Location Verification Attached  |
| Payment issued to Vendor:Transfer Documentation attached with transfer date, destination, and amount |
| Payment Issued to Participant:Copy of check to participant, details of fund transfer, deposit receipt showing deposit to participant’s account |
| Exceptions & Special Cases – Small Business or Individuals as Institution or VendorDocument reason for exception and documentation of purchase |