

APWU Hurricane Sandy Employee Impact Sheet

**Return sheets to scarney@apwu.org
fax (202) 216-2634 by cob Friday, November 29, 2012**

Employee's Name:

APWU Local / State (if MAL): *If other indicate which union or management association*

Category of Loss: *Select Only One: A or B as described:*

Category A: *Significant loss and currently displaced from residence; Anticipate ability to return to their home at some point.*

Category B: *Primary residence completely destroyed; No expectation of being able to return home*

Current Living Arrangements: *Staying with family, friends, hotel, FEMA trailer, shelter, other*

Current Mailing Address:

Best Contact Number:

Indicate A (Adult), C (Child); Relationship and Ages If Known

Household: *# of Adults (A), # of children (C) living with member when home was damaged/destroyed*

Indicate High School Grade or College For Each If Known

Computers: *Indicate if ALL were destroyed; # of children in high school grades 9-12; # of children in college*

Post Office: *if displaced from workplace ALSO indicate office where they are currently working*

Uniforms: *Were employee's uniforms ruined*

Other Details: *You feel are pertinent*

Submitter's Info: *Name, Title, Organization (if APWU - your local), Best Contact #*

APWU Human Relations Department Use Only:
Do not write in this box