

# LONG ISLAND TEACHERS BENEVOLENT FUND

100 So. Main Street  
Suite 205  
Sayville, New York 11782

## BURIAL AWARD APPLICATION

**ELIGIBILITY:** Payable to the individual who incurs the funeral expenses of any member of a participating local who dies while in active service.

**APPLICATION PROCESS:** Local of the deceased makes application for the grant by completing this form and submitting it, along with a death certificate, to the Fund Coordinator.

**AMOUNT OF AWARD:** \$600.00

Name of deceased: \_\_\_\_\_ Social Security No: \_\_\_\_\_

Was the deceased an active employee of the District/Employer at the time of death:

\_\_\_\_\_

Name of individual paying funeral expenses: \_\_\_\_\_

Address: \_\_\_\_\_ City/State \_\_\_\_\_ Zip: \_\_\_\_\_

Relation to deceased: \_\_\_\_\_

Name of Local: \_\_\_\_\_

\_\_\_\_\_

Signature of Local President

\_\_\_\_\_

Date .

**NOTE:** A copy of the Death Certificate must accompany this application

**Forward To:** Long Island Teachers Benevolent Fund  
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