



Covenant Foundation



Covenant Health

In support of:



Covenant Care



Covenant Living

CABLE FAMILY COMPASSIONATE SUPPORT ENDOWMENT FUND REQUISITION FORM

Fiscal Year _____

The Cable Family Compassionate Support Endowment Fund was created by the Cable family and Covenant Foundation, formerly known as the Caritas Hospitals Foundation. The purpose of the fund is to provide assistance, on a non-discriminatory basis, for patients/residents and their families to cope with financial hardship resulting from hospitalization. The fund will be used as a "fund of last resort" to provide temporary assistance and financial support that is not covered by other financial or social programs.

Previously, this funding was available only to the Misericordia and Grey Nuns Community Hospitals and the Edmonton General Continuing Care Centre. Upon consultation with the donor, Covenant Foundation has expanded the reach of this funding to include all Covenant sites supported by Covenant Foundation across Alberta.

Site: _____

Social worker/Patient Care Manager Name: _____

Unit or Program: _____

Use of Funds – Please indicate with an "x" in the box provided below:

- | | |
|-----------------------------------------|-------------------------------------------------------|
| <input type="checkbox"/> Accommodations | <input type="checkbox"/> Basic Personal Needs |
| <input type="checkbox"/> Meals | <input type="checkbox"/> Specialized Equipment |
| <input type="checkbox"/> Clothing | <input type="checkbox"/> Medication Cost |
| <input type="checkbox"/> Transportation | <input type="checkbox"/> Quality of Life Enhancements |

**Please contact the Foundation if the expense is over \$500 or if it doesn't align with the Terms of Reference.*

Please give a detailed explanation/description to substantiate the use of funds as a last resort:

Date Funds Issued: _____

Disbursement Amount: \$ _____

Authorization Signature: _____

Please print name

Signature

CC/CL GL Coding:

