Robert R. DeCormier Memorial Trust Fund

New York State Retired Teachers' Association
8 Airport Park Blvd., Albany Airport Park, Latham, NY 12110-6414

ELIGIBILITY UPDATE FOR CONTINUED DECORMIER ASSISTANCE

Please complete and submit the following information for the year _____

Print your name _____

Are you now receiving Medicaid? Check one: ☐ Yes ☐ No

What is your yearly income?

DECORMIER _____
SOCIAL SECURITY _____
PENSION _____
OTHER _____
(TOTAL) _____

Describe your current need for continued financial assistance from the DeCormier Trust:
(use other side if additional space needed)

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Do you file a tax refund? STATE: ☐ Yes ☐ No FEDERAL: ☐ Yes ☐ No

If yes, please attach a copy of your most recent Federal and/or State return to this form and return the information to the Trust in the enclosed addressed and stamped envelope. Thank you.

Signature _____ Date _____

Phone _____ Email _____

(Revised 3/17)