PO Box 4113 928-523-2223 Fax 928-523-7486 nau.edu/hr

Human Resources

Partner Assistance Program Request

	To o	ıualifv	/ for	partner assistance	benefits at I	Northern Arizor	a University.	the appli	icant must	provide the	following
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- A. Married with proof of legal marriage
 OR -
- B. Two adults with proof of 3 of the 5 following:
 - 1. Having reciprocal wills
 - Evidence of dependent children together (i.e. biological, adopted, or <u>children in non-traditional</u> <u>families</u>)
 - 3. Maintaining a primary residence together (6 months or more)
 - 4. Maintaining a joint banking or savings accounts
 - 5. Maintaining each other as primary beneficiary of life insurance policies, pension, or retirement plans.

documentation, and I will inform Northern Arizona University if I no longer meet the requirements.

Employee Signature: ______ Date: ______

I certify that I meet the above minimum eligibility requirements and have provided NAU with the appropriate

I have examined satisfactory written proof of the above requirements and determined that the applicant is qualified for partner assistance.
Partner Assistance Program Representative: