

APPLICATION FOR HARDSHIP WITHDRAWAL

As a Participant in _____,
I hereby apply for a hardship withdrawal. I confirm that the
reason for the hardship is:

- () medical expenses for me, my spouse or dependents
- () funeral expenses of a family member
- () purchasing my principal residence
- () paying tuition, related educational fees, and room and board expenses for the next twelve (12) months of post-secondary education for me, my spouse or dependents
- () preventing foreclosure on my principal residence or eviction from my principal residence

I understand that the Administrator will consider my request within a reasonable time, and I agree to provide any additional information which the Administrator may require.

Participant

Sworn to and subscribed before me

this _____ day of _____ 20____.

Notary Public