



Ruby Has Heart (RHH) provides grants for Team Members of Ruby Tuesday who have had an unforeseen circumstance or emergency resulting in severe financial need. RHH was established to provide assistance with the following:

- Short-term help for basic human needs (i.e., clothing, food, travel and lodging) after a fire, flood, hurricane or other natural or manmade disaster.
- Burial/Funeral assistance for the passing of a Team Member or immediate family member.
- Financial hardships due to unforeseen circumstances (outside the scope of insurance) for those who request short-term help for basic human needs (i.e., clothing, food, travel and lodging).

**Basic Guidelines for Application:**

- Active full-time and part-time 90-day tenured Team Members and Managers are eligible to apply. Definition of "active" is holding active status in the Ruby Tuesday payroll system or being on approved leave of absence at the time of application.
- When filling out the Application for Emergency Assistance, please remember to complete all sections.
- Applications must be complete in order to process. This application as well as any materials sent will become property of the Ruby Has Heart Fund. Please do not send original bills.

**Please send the following required information:**

- Official documentation of unforeseen situation (fire report or other official report; photos, newspaper articles, funeral home contracts).
- Any additional information that might be helpful in providing an accurate assessment of your needs. (The amount of financial assistance will be determined by the RHH.)

**Unfortunately, the Ruby Has Heart Fund cannot:**

- Replace lost income.
- Be a substitute for disability or medical insurance.
- Be used for debt consolidation.
- Replace expenses derived from non-emergency circumstances.

**Please return application with additional documentation**

**Ruby Has Heart Fund**  
**Attn: Clara Heaton**  
**216 East Church Avenue**  
**Maryville, TN 37804**

**Email:** [RubyHasHeartApplications@rubytuesday.com](mailto:RubyHasHeartApplications@rubytuesday.com)

**Questions?** Please call 1-800-325-0755 Ext. 5824

**Fax:** (865) 379-6817

Team Member Information		
First Name	Middle Initial	Last Name
XXX-XX- Last 4 digits of SSN		Phone
Street Address		Apt #
City & State	Zip	Personal e-mail address

Employment Information	
Location of Ruby Tuesday where you are currently employed	
House Code or Department	
Position Held	
Hire Date	
GM or Supervisor Name	
Business Phone	

Dependents			
First and Last Name	Relationship	Age	Current Address

Financial Information	
Net Pay of Ruby Tuesday Team Member	
Net Pay of Spouse	
Disability/Retirement	
Other (Child Support, Unemployment, State or Gov't assistance)	
<b>TOTAL MONTHLY INCOME</b>	

Bank Accounts		
Type of Account	Bank or Financial Institution	Balance
		\$
		\$

Monthly Household Expenses	
Monthly Expense	Amount
Rent/Mortgage	\$
Utilities	\$
Phone	\$
Food	\$
Clothing	\$
Child Care	\$
Car Payment	\$
Car Insurance	\$
Transportation (fuel or bus fare)	\$
Credit Cards	\$
Other (Explain)	\$
<b>TOTAL MONTHLY EXPENSES</b>	\$

## EXPLANATION OF EMERGENCY SITUATION CAUSING FINANCIAL HARDSHIP

Amount of Grant Requested: \$

### **PLEASE READ AND SIGN:**

**RELEASE OF INFORMATION:** I authorize my payroll office to release information pertaining to my earnings, work status and/or leave information, and for the RRF to receive information from my GM (or supervisor if employed at the Support Center) as deemed necessary. I have read the RRF guidelines and agree for my name and a brief explanation of my hardship to be released to the RRF.

I understand that it is my responsibility to report any change in my employment status, any change of address, any change of dependent care, and any change in family income and that providing inaccurate information may result in disqualification for consideration for aid.

By signing below, I certify that I am employed by Ruby Tuesday and have fully and truthfully completed this application, and that I have no assets that could reasonably be used to satisfy this emergency.

\_\_\_\_\_  
*Team Member Signature*

\_\_\_\_\_  
*General Manager or RSC Supervisor Signature*

\_\_\_\_\_  
*Team Member Printed Name*

\_\_\_\_\_  
*GM or RSC Supervisor Printed Name*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Date*

***(Application must be signed by your General Manager or Support Center Supervisor to be processed.)***