



# SMEA Backpack Program

**YOU** can nominate your family or another eligible SMEA members family to be considered! SMEA members who are selected will receive backpacks with school supplies for their **dependent child/children grades K-12**. Fill out this application completely (incomplete applications will NOT be considered) and return it by mail, fax, or email. You can also fill out the application on our website at [mysmea.com](http://mysmea.com)

**Application MUST be received by Wednesday, July 6, 2022**

2937 Veneman Ave, Ste. A115 Modesto, CA 95356	or	Inter-office mail: SMEA	or	Fax to: 888-620-8909	or	Email: <a href="mailto:smea@savemart.com">smea@savemart.com</a>
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If you are nominating a fellow SMEA Member, please fill out as much of his/her information as possible below.

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ Employee ID: \_\_\_\_\_  
Primary Phone: (\_\_\_\_\_) \_\_\_\_\_ Store # or Location: \_\_\_\_\_ Employment Status: \_\_\_\_ F/T \_\_\_\_ P/T  
Marital Status: \_\_\_\_\_ Spouse's Employment Status: \_\_\_\_ F/T \_\_\_\_ P/T Spouse's Position: \_\_\_\_\_

**REQUIRED** List all dependent children in SMEA members home (list additional children on back of paper)  
**Please Note: you may be asked to provide proof of dependency**

Child #1: _____ First Name and Last Name	_____ Grade	<input type="checkbox"/> F <input type="checkbox"/> M	_____ Age	_____ Relationship to SMEA Member
Child #2: _____ First Name and Last Name	_____ Grade	<input type="checkbox"/> F <input type="checkbox"/> M	_____ Age	_____ Relationship to SMEA Member
Child #3: _____ First Name and Last Name	_____ Grade	<input type="checkbox"/> F <input type="checkbox"/> M	_____ Age	_____ Relationship to SMEA Member
Child #4: _____ First Name and Last Name	_____ Grade	<input type="checkbox"/> F <input type="checkbox"/> M	_____ Age	_____ Relationship to SMEA Member

**REQUIRED** : Please provide a short summary of why you are nominating your family or this SMEA member for the Backpack Program.

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**Please use the back of paper if this is not enough space.**

**By signing below**, I acknowledge that all information provided is accurate and true, and that I'm aware SMEA maintains a strict confidentiality policy, but I understand that my Manager or Supervisor may be contacted to assist with processing this application.

**\*Your signature is required if you are nominating another SMEA member or if you are nominating yourself.**

\_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_  
*Print Your Full Name Clearly* *Signature* *Phone Number* *Date*

**Rules:** Completed applications must be received **no later than Wednesday, July 6, 2022**. Membership in SMEA will be confirmed and those considered may be contacted with questions. Only SMEA members in good standing will be considered. Turning in an application doesn't guarantee a backpack. All information is kept confidential. Awarded backpacks can not be traded or sold. We thank you for understanding that not all deserving applications will be selected, as there are a limited number of backpacks available. SMEA will make every effort to deliver backpacks to your work location at the beginning of August.