## Emergency Financial Aid Grants to Students Under the Coronavirus Aid, Relief, and Economic Security (CARES) Act

The U.S. Department of Education has made Emergency Financial Aid Grants to students of our institution who need financial support for their expenses related to the disruption of campus operations due to Coronavirus. This application permits students to apply for these need-based grants. Campus administration will use the information you provide here to determine your eligibility for a grant and the amount for which you will be eligible. Each student will be eligible for only one grant, and only one application will be considered per student. Please fill out this information neatly and completely and provide it to your campus Financial Aid Officer, or Financial Aid Director. Only active students who are actively participating in all courses and who are in good standing will be eligible to receive the grant. Student must be accepted for enrollment prior May 1st, 2020.

Student Name:	Email:
Address:	City:
State: Zip: Last Four Digits of SSN:	Phone Number:
Are you eligible for Financial Aid?	
Yes No	
Have you incurred expenses due to disruptions cause	d by the Coronavirus pandemic?
Yes No	
Check all situations that apply to you.	
I am financially responsible for my food expenses I am financially responsible for my housing expen I am financially responsible for expenses related t I am financially responsible for paying for technol I am financially responsible for my own health can I have children and am financially responsible for	nses to my course materials to attend school logies associated with attending online classes re costs
I attest that all information is true and accurate, and I Grant to help cover the cost of expenses incurred due will be unable to revise this request after submitting i school will determine my eligibility for grant monies be	to the Coronavirus pandemic. I understand that I it, and I understand that the administration of my
Signature	Date
For Administration Use Only	

Student Eligibility Amount: \_\_\_\_\_

School Administrator: