



Emergency Financial Aid Grants to Students under the Coronavirus Aid, Relief, and Economic Security (CARES) Act Student Application

Student Name

Last 2 digits of SSN

Have you been affected by the COVID-19 pandemic? YES

NO

If yes, please check how you have been affected (check all that apply):

Lost job / furloughed

Reduced work hours / wages

Contracted COVID-19

Help take care of someone who contracted COVID-19

Having to provide childcare due to school closures

Required to shelter-in-place by government authority

Housing situation was impacted

Financial support person lost job/reduced wages that impacted direct financial support to myself

Other:

I would like to request financial assistance to help cover my expenses due to the COVID-19 coronavirus pandemic. YES NO

- If you answer NO and forgo the payment, we will reallocate funds to assist other students in need.

In consideration for the advanced funds and as conditions for their receipt, Recipient warrants, acknowledges, and agrees that:

The advanced funds shall not be used for any purpose other than related to the disruption of campus operations due to coronavirus, such as food, housing, course materials, technology, health care, and child-care.

Student Signature

Date