

Application for Student Emergency Funds

Purpose

The Central Virginia Community College Student Emergency Fund is designed to address exceptional financial hardship faced by CVCC students that could impact their continued enrollment. Examples of types of emergencies to consider: house fire, medical issues, assistance with temporary housing for a student left homeless, etc. Mental Health issues are to be determined by the Student Accessibilities Coordinator, Community Connections Coordinator, or Dean of Student Success and will not go to the Student Emergency Fund Committee. The referral will be made directly to the Foundation Office, once the assessment is done. Mental Health funding also may be used by the Threat Assessment Team if a mental health assessment is needed to determine if a student can remain on campus. Mental Health funding will only be used if the student does not have insurance.

Conditions

- Funds may not be used for tuition or books.
- Payment will be made directly to the company/business owed or gift cards will be provided.
- Emergency Fund application requests may be made up to \$250. A student may only apply once a semester for emergency funds.
- Grant recipients **MUST** write a letter or email of thanks to the Educational Foundation about how the grant money will help them to stay in college, complete their program, and achieve their goals. Emergency funds will not be released until the Educational Foundation receives the thank you letter.

Eligibility

To receive funding, students must have a minimum 2.0 GPA and be enrolled in six (6) credits or enrolled in a Workforce program and successfully passing.

Instructions

1. The student must complete the Student Information section on the reverse side of this application and attach copies of the bill(s) to be paid, if applicable.
2. The student’s instructor/counselor must complete the Instructor/Counselor Recommendation section on the reverse side of this application.
3. Instructor/Counselor will submit this form to a member of the Student Emergency Fund Committee.
4. The Educational Foundation will contact the committee member regarding approval of the application.

Instructor/Counselor Recommendation (someone other than the SEF Committee member signing)

Instructor/Counselor Name: _____ Program: _____
 Currently Enrolled in _____ Credits Current Grade: _____
 Attendance: _____% Potential for success: _____
 Comments: _____
 Instructor/Counselor Signature: _____

Foundation Use Only

Grant Approved Yes No Amount \$ _____
 Form of Funding (gift card, payment of bill, etc.) _____
 Signature: _____

This form cannot be changed without the permission of the CVCC Educational Foundation.

Student Information

Name: _____ Date: _____

Student ID Number: _____ Daytime Phone: _____

Number of Dependents: _____ Marital Status: _____

Amount Requested: \$ _____ for _____ (rent, utilities, car repair, food, gasoline, etc.)

Please indicate all sources of income, e.g., employment, spouse employment, child support, welfare, worker retraining, food stamps, etc.

Monthly income: \$ _____

Sources(s): _____

Employer Name: _____ Your Position: _____

List below your monthly expenses (rent, mortgage payment, utilities, food, gas, car payment/insurance, etc.)

Provide a brief description of your exceptional need/circumstances below and what you have done to find other funding:

By signing this application below, I certify that: 1) the information on this application (front and back) is complete, true, and correct; 2) I am in need of this funding to continue my education at CVCC; 3) I authorize the release of my financial aid information; and 4) I will write a thank you letter addressed to the Foundation Board before any emergency funds will be released.

Student Signature

Date

Student Emergency Fund Committee Recommendation

Recommended: Type (circle) Em. Funds, Food Card, Gas Card, Mental Health) Amount \$ _____

Not Recommended

Comments: _____

Committee Member Signature: _____

Financial Aid Information

Financial Aid Disbursement after Tuition \$ _____ Date: _____

Student has completed a FAFSA: Yes No Eligible: Yes No

Comments: _____

Financial Aid Signature: _____