



## Federal Emergency Grant Application

Student Name \_\_\_\_\_ Student ID \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

Semester aid is needed \_\_\_\_\_

This application is for curriculum students who did not file a FAFSA and have been affected financially by the global pandemic, Covid-19. A new application is required each semester. In rare instances, students who filed a FAFSA may apply for additional funds for extreme circumstances. Applying does not guarantee funds will be awarded.

Please describe the financial impact Covid 19 has had on your family. Attach another page if necessary.

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If you would like the federal emergency funds awarded to be posted to your student account to cover any of your institutional charges, please indicate so below.

I would like any federal emergency funds awarded to be posted to my student account to cover any balance I may have.

I would like any federal emergency funds award to be mailed to my address of record.

\_\_\_\_\_  
Student Signature (Must be physical signature,  
electronic signatures will not be accepted)

\_\_\_\_\_  
Date