APPLICATION FOR EMERGENCY ASSISTANCE

Purpose
Grants help meet emergency needs that would prevent students from continuing their education.

Conditions
These funds will cover emergency needs up to $200; checks will be made payable to the company owed.
Grants may not be used for tuition, books, or supplies. Please apply for scholarships to help with these expenses.
Grant recipients will be provided with a thank you card to be completed for the Foundation Board.

Eligibility

<table>
<thead>
<tr>
<th>Question</th>
<th>True</th>
<th>False</th>
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<tr>
<td>I am a college student at CPTC (<em>Not Running Start or NWCTHS</em>)</td>
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<td>I am a full-time student at CPTC (12 or more credits)</td>
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<td>I have been attending CPTC for six or more weeks.</td>
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<td>I am unable to pay my rent or utility bill.</td>
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<td>This is the first time I have applied for emergency assistance.</td>
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<tr>
<td>I have applied for Federal Financial Aid.</td>
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<td>This quarter, I received less than $2,500 on my HigherOne Card.</td>
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<td>I have at least 3 weeks remaining until my program completion.</td>
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<td>I am not in default on any federal student loans.</td>
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If you answered “True” to all questions, you are eligible to apply. Please follow the step-by-step instructions below.

If you answered “False” to any question, please speak with Michelle Barre, Program Assistant, Advising & Counseling, in Building 12 or at 253-589-5583 before applying.

Step-by-Step Instructions

1. Fill out the Student Information.
2. Ask your instructor to complete the Instructor’s Recommendation section.
3. Attach copy of rental agreement/letter from landlord or utility bill.
4. Submit this form to Michelle Barre, Building 12.
5. If you are approved, Michelle Barre will contact you within three to five (3-5) business days notifying you that your check is ready for pick-up. Please write a thank you letter to the Foundation Board of Directors; a card will be provided for your use.

Student Information

Please tell us a little about your circumstances and why you are requesting emergency assistance.

________________________________________________________________________

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

Monthly Income $__________________

Source(s)  

Employer Name __________________________ Your Position __________________________

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

________________________________________________________________________
APPLICATION FOR EMERGENCY ASSISTANCE

Name ___________________________ Date __________________________
Student ID Number ___________________ Daytime Phone ___________________
CPTC Student Email ___________________ Ok to leave private message?  □ Yes  □ No
Number of Dependents ___________________ Marital status ___________________
Program ____________________________ Expected Graduation Date: _____________
Amount Requested ___________ (not to exceed $200) for ___________ (rent, utilities, etc.)
Check to be made out to ___________________________ (company or landlord name)

By signing this application below, I certify that: 1) the information on this application (front and back) is complete, true, and correct and that 2) I am in need of this grant to continue my education at CPTC.

_____________________________ __________________________
Student Signature Date

Instructor Recommendation

Instructor Name: ____________________________ Program: ____________________________
Entry Date: ____________________________ Completion Date: ____________________________
Progress in Program: ____________________________ Potential for success: _____________
Current grade: ____________________________ Attendance: _____________ %
Comments: __________________________________________________________________________
Instructor’s Signature: ____________________________ Date: ____________________________

Financial Aid Recommendation

Financial Aid Disbursement after Tuition $ ____________ Disbursement Date: ___________
Unmet Need $ ____________ Student Loan in Default  □ YES  □ NO
Student has completed a FAFSA  □ YES  □ NO Student Pell Grant eligible  □ YES  □ NO
Comments: __________________________________________________________________________
Financial Aid Signature ____________________________ Date: ____________________________

For Foundation Use Only

Grant Approved  □ YES  □ NO Amount $ ________ Check Payable to: __________
Comments __________________________________________________________________________
For ___________________________________ Account # ___________
Signature: ____________________________ Date: ____________________________