

Cadet Emergency Grant Application

Student ID Number	Semester and Year	Expected Graduation Date	
Last Name	First Name	Middle Initial	
Local Address			
City	State	Zip	
Email		Telephone/Cell	

Itemized Budget Attach supporting documents of the event or situation and an itemized budget on how funds will be spent. Applicants may be required to provide further documentation if the committee needs additional information to make a decision.

Description of Funding Needed (e.g., car repair, rent, academic supplies)	Amount (\$00.00 format)	Type of Documentation Provided (attach with application)

Total amount requested (maximum is \$500)

Please provide complete answers to the questions below (attach additional sheets if necessary).

1. What are the circumstances that led you to apply for the student emergency grant? (Must demonstrate a one-time, unexpected crisis that is impacting your current enrollment)

2. What other types of assistance have you sought?

3. How will this fund allow you to continue your education and help you achieve your goals?

I, the undersigned, certify that the information provided on this application is true.

Applicant Name

Applicant Signature

Date

Submit completed form *and supporting documentation* to **deanofcadetsoffice@csum.edu**.