

## **Student Emergency Assistance Program Guidelines**

The CVCC Foundation Chris Patterson Student Emergency Assistance Fund is for students who have an unforeseen financial emergency, which would otherwise prevent them from continuing to attend CVCC. These funds are not designed to be a consistent supplement to a student's education or to sustain students between refund checks. The requests must be urgent in nature.

The maximum assistance amount per student is \$400 per semester and shall not be awarded to the same student in consecutive semesters, unless dire circumstances are warranted. There is a lifetime maximum of \$1,000 per student.

Funds are paid directly to vendors ONLY. A check will not be cut directly to the student. Funds are not considered loans and do not require repayment to the college.

## Types of Expenses That May Be Covered

- Educational Expenses (books, supplies specific to your degree plan, licensure exam fees, etc.)
- Significant one-time uncovered medical expenses to the family
- Loss of housing or income due to an emergency situation or natural disaster
- Safety-related needs (changing a lock on vehicle or home)
- Replacement of essential personal belongings due to fire, theft, or natural `disaster
- Other needs related to college attendance, including costs related to children, will be considered on a case-by-case basis

### Expenses That May NOT Be Covered

- Tuition, fees, extracurricular activities
- Traffic tickets or other fines
- Entertainment, recreation, non-emergency travel or non-essential expenses
- Pet-related expenses



#### Eligibility Requirements

- 1. Student must have a financial hardship resulting from an emergency, accident, or other unexpected situations. (loss of job)
- 2. Student must have completed at least one semester and is currently registered for at least six credits.
- 3. Student must have at least a 2.0 cumulative GPA with the college.
- 4. Student must have a zero balance with Student Receivables.
- 5. Other possible resources MUST have been considered and are either not available or insufficient.
- 6. Student must be able to provide sufficient documentation of financial hardship.
- 7. Student must obtain a referral letter from a CVCC faculty member, financial aid representative, or advisor.

#### Selection Criteria

 Awards will be determined by the CVCC Foundation Chris Patterson Student Emergency Assistance Committee.

## **Application Process**

- A completed application form along with documentation verifying situation, if applicable, and a CVCC reference letter (faculty, financial aid, student advisor)
- Attach letter outlining hardship and request.
- Mail completed packet to:

CVCC Foundation c/o Karen Kelly 2602 College Drive Phenix City, Alabama 36869

#### Committee

The CVCC Foundation Chris Patterson Student Emergency Assistance Committee shall consist of a diverse mix of faculty and staff at Chattahoochee Valley Community College and Foundation board members. The committee will convene and make recommendations. Meetings may take place in person, by conference call, or by e-mail communication.

For more information, contact Karen Kelly at 334-291-4938 or karen.kelly@cv.edu



# **Student Emergency Assistance Application**

Student Name:	Student ID#:		
Mailing Address:			· · · · · · · · · · · · · · · · · · ·
Phone:	Em	ail:	
Have you met the eligibility requirements listed on page 2?			□ Yes □ No
Have you completed a current FAFSA application?			□ Yes □ No
Have you applied for the Federal Work Study Program for the current term?			□ Yes □ No
Have you applied for a Federal Student Loan?			□ Yes □ No
Have you considered all other forms of assistance (family, friends, loans, etc.)?			□ Yes □ No
Letter of request attached			□ Yes □ No
Reference letter attached			□ Yes □ No
*Information above has been verified by Financial Aid			□ Yes □ No
Please check with the Fina awards/scholarships will a			
By signing this application, I understand th with other departments.	at my student	t and financial informatio	n may be shared
Student Signature		Date	
*Financial Aid Authorized Signature		Date	
For For	undation Us	e Only	
Committee Approval:	□ No	Date:	<del></del>
Amount of Funding:	Vendor for Payment:		