APPLICATION FOR EMERGENCY FUND GRANT

Barbara Stanley Fund, English Dept., UCA

Name : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ UCA ID: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Status (circle one): English major English MA student

*Briefly indicate the need for which you are seeking assistance, and the requested amount.*

*For example, you might require short-term assistance to help pay for rent or utilities, vehicle repair, medicine, or schoolbooks. Since funds must be paid directly to the dispenser of the service (e.g. landlord, auto repair shop, pharmacy, utility company, etc.), please give information about where the funds should be sent or how they should be disbursed to the appropriate party. Each student is limited to $100 in assistance per school year.*

*Once completed, please submit the application to the department secretary in Irby 317.*

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*In signing below, you acknowledge that you meet the eligibility criteria indicated above.*

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(Your signature)

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| *For department use:**Application: \_\_\_\_\_\_\_\_ funded \_\_\_\_\_\_\_\_ not funded**Amount funded: \_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_**Reason for not funding: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Signature of Committee Chair or Department Chair:* |