

## **Campus & Community Life Emergency Fund Application**

The Campus Life Advocacy Center has access to emergency funds for students who fall under unexpected financial hardship. The Betty Boyd Fund and the Kenneth D. and Carolyn T. Gray Student Emergency Fund shall provide financial assistance to students at West Virginia University who have encountered emergencies during the academic year. Criteria to qualify for these funds is including but not limited to: natural disaster, health concern, change in parent or personal employment, financial hardship, money needed for unplanned trips home due to a death or illness of a family member, replacement clothing or books due to a fire or other disaster, medical emergencies or other unforeseen but urgent situations. Use of the funds shall be determined by appropriate officials in the Division of Student Life and approved by the Dean of Students.

### **I. GENERAL INFORMATION**

1. Emergency monies are not to exceed \$500.00 unless unusual, documented circumstances exist.
2. Students may receive only one Emergency Fund disbursement managed by Campus Life within an academic year.
3. Emergency Funds are not intended for tuition and fees or standard living expenses.
4. Emergency Fund discernments are not made when school is not in session.
5. Each Emergency Fund application will be considered on its own merits.
6. Supporting documentation showing need may be required.
7. Student's must be registered for a minimum of 6 credit hours.

### **II. PROCESSING AND DISBURSEMENT**

1. Applications are reviewed within one business day.
2. **There will be no cash disbursements.**
3. Once you have filled out the application, please email the completed form to: [Campuslife@mail.wvu.edu](mailto:Campuslife@mail.wvu.edu).

# APPLICATION

## STUDENT INFORMATION:

1. \_\_\_\_\_  
  First Name  M.I.  Last Name
2. WVU ID number: \_\_\_\_\_
3. Phone number: \_\_\_\_\_
4. E-mail address: \_\_\_\_\_
5. Campus address: \_\_\_\_\_
6. Permanent address: \_\_\_\_\_
7. Cumulative GPA: \_\_\_\_\_
8. Class rank: \_\_\_\_\_  
  (Fr., Soph., Jr., Sr., Grad)
9. Credit Hours Currently Enrolled: \_\_\_\_\_

## EXPLANATION OF WHY STUDENT IS APPLYING FOR EMERGENCY FUNDS AND HOW THE FUNDS WILL BE USED:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

AMOUNT OF EMERGENCY FUNDS REQUESTED: \$ \_\_\_\_\_

I affirm that the information I have included on this application is true to the best of my knowledge.

\_\_\_\_\_ Signature \_\_\_\_\_ Date

Approved:  Denied:  Reason: \_\_\_\_\_

\_\_\_\_\_ Assistant Dean and Executive Director of Campus Life Approval \_\_\_\_\_ Date

\_\_\_\_\_ Chief Student Affairs Business Officer Approval \_\_\_\_\_ Date