



MACCares Student Emergency Fund Application

With funds provided by the U.S. Department of Education to support students impacted by the COVID-19 emergency, the **MACCares Emergency Fund** will award dollars to students who have been impacted by the pandemic.

Eligible students must:

- Be actively enrolled in a Career Development program at MACC during the period of time 1/4/21 - present.
- Have a current FAFSA on file at MACC.
- Demonstrate need for emergency expenses related to the impact of the coronavirus pandemic.
- Submit a written statement and any possible **documentation** to support a claim for emergency expenses.

Examples of emergency expenses or disruptions related to COVID-19 include, but are not limited to:

- Food
- Housing
- Child care
- Health Care
- Technology and equipment
- Transportation (non-routine repairs)

APPLICATIONS WILL BE CONSIDERED ON AN ONGOING BASIS. Incomplete applications or applications without sufficient documentation will not be considered.

All forms and documentation can be submitted in any of the following ways:

- email to cmcmillen@madisonrams.net;
- mail to 600 Esley Lane, Mansfield, OH 44905
- fax to 419-589-2150
- drop off at Madison Adult Career Center (call ahead for office hours)

For additional information or questions, please call the Financial Aid Office at 419-589-6363.

(Please see reverse side for application form)

STUDENT NAME _____ **PROGRAM** _____

Amount you are requesting \$ _____

PERSONAL STATEMENT- Please provide a detailed explanation regarding the negative financial impact that the COVID-19 crisis has had on you or your family. Provide as many details as possible with documentation attached (can include; receipts for utility bills, food, childcare, healthcare expenses, etc. and/or employment termination letter). You may attach additional pages if necessary.

SIGNATURES AND CERTIFICATIONS

Please read the following and acknowledge understanding by signing below:

I understand that there are limited emergency funds. I understand that submission of an application does not guarantee award of funds or that I will receive the amount requested.

I certify that items in my personal statement are a direct result of an emergency expense related to the impact of the coronavirus pandemic.

I acknowledge that all of the information on this form is true and complete to the best of my knowledge. I know I may be required to provide further information if necessary. I understand that the information I submit may be shared with institutional staff that have a need to know for purposes of reviewing and processing this application, and/or to comply with institutional policy or law.

Student Signature _____ Date _____