

**COURSE HERO STUDENT EMERGENCY AID FUND
FOR MATRICULATED STUDENTS
AT KINGSBOROUGH COMMUNITY COLLEGE**

The Course Hero Student Emergency Aid Fund seeks to assist eligible students coping with recent, unexpected hardship, so that they may continue their education at Kingsborough Community College without interruption. The Fund's long-range goal is to use its financial resources to help the widest range of students succeed in graduating from college.

The purpose of the Emergency Grand Fund is to enable matriculated students in good academic standing who are experiencing short-term financial emergencies to remain in school. Students who demonstrate need and are facing a current emergency may apply for a grant.

Kingsborough Community College is the grateful recipient of a grant to establish this fund from Achieving the Dream and in partnership with Course Hero.

Please note all recipients will be required to provide a summary statement to Course Hero about how the grant alleviated their presenting situation within 30 days of receiving their grant. Please address to Dr. Tasheka Sutton-Young Interim Vice President for Institutional Advancement and Executive Chief of Staff, at M243.

The information requested below will help determine your eligibility for this grant. Please note that your application must be complete in order to be given consideration. Completion of this application is **not** a guarantee that you will be awarded funds.

If approved, you will receive a notification letter from the Office of the President detailing how you will receive the funds and the deadline for submitting your letter of appreciation.

Please note that funds **cannot** be awarded for:

1. Previous debts to college
2. Full or partial tuition/fee costs
3. Legal representation in a criminal proceeding or Kingsborough Community College disciplinary proceeding

Please Print or type:

Date of Request: _____ Amount Requested: _____

Applicant's Name: _____ KCC Empl ID: _____

Current Mailing Address: _____

Credits Completed: _____

Cell/Home Phone: _____ Email Address: _____

1. Attach a 1-page statement explaining your emergency and describing how the funds will be used to alleviate the situation. Please itemize each cost and provide a total of requested amount. Lastly, please provide a "plan of action" for how you intend to cover these expenses moving forward.

{turn page over for more important information}

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2. Please provide a form of documentation to support your emergency request. Examples of acceptable documents include medical bills, bank statements, letter from employer stating your loss of job, letter from your landlord stating rent owed or loss of housing, police report for theft, etc.
3. If you are denied the grant, would you be interested in an alternative scholarship?
4. If this is not the first time you have applied for emergency funds from Kingsborough Community College, please indicate when and what funds you have requested and received.

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

Applicant Signature: _____ Date: _____

Applicant Name (please print) _____

This fund was established by a grant from Course Hero and is administered by Kingsborough Community College. By accepting money from this fund, you agree to the following terms:

Applicant Agreement

- I am aware that the Course Hero Emergency Grant is designed to assist a broad range of individuals for short-term, nonrecurring situations.
- By accepting this grant, I agree to provide a letter that Kingsborough Community College will share with Course Hero that documents how the grant alleviated the emergency and, therefore, allow me to continue my education at Kingsborough Community College.
- I understand that I need to provide this report before I can register for the next semester.
- I understand that the falsification or distortion provided in my application for the emergency grant or in the subsequent report could jeopardize funds for students in the future. Such action may subject me to disciplinary action by Kingsborough Community College.
- I am aware that In the event that the total amount of your award totals \$600 or more during a calendar year, a Form 1099-Misc may be issued to you at year-end, governed by IRS regulations.

I have read and understood the above agreement. I agree to the terms and conditions of the award, and I warrant that any and all representations made by me are true and to the best of my knowledge.

Student's signature: _____ Date: _____

Student's name (please print or type) _____

To be filled out by the Scholarship Committee: Semester: _____ Balance: _____

EFC: _____ Financial Need: _____ Pell: \$ _____ Scholarship Amount: \$ _____ Approved by: _____