

COVID-19 EMERGENCY ASSISTANCE FOR CURRENTLY ENROLLED STUDENTS

The COVID-19 Emergency Assistance fund helps currently enrolled students with extraordinary one-time costs that have arisen as a result of the COVID-19 pandemic. At this time the maximum amount of emergency assistance that will be provided from this grant is \$1,000.

Student's Name: _____

SMCM ID: _____

The requested funds will be used for:	Amount Requested
Basic Needs	
• Food	\$ _____
• Housing and moving expenses (e.g., rent, storage)	\$ _____
Education-Related Expenses	
• Technology for online classes	\$ _____
• Transportation (e.g., unexpected travel costs)	\$ _____
• Child care	\$ _____
Other	
• Healthcare and medical expenses	\$ _____
• _____	\$ _____

Describe how COVID-19 has created unexpected costs associated with your enrollment at SMCM. When applicable and available, please upload documentation to support your request.

Signature: _____

Date: _____

Next Steps:

- Sign in signature field and date.
- Email completed form to osfa@smcm.edu.
- You will be contacted via email with the outcome of your request.