



LFCC Emergency Assistance Funds - Application

The Emergency Assistance Funds are designed to address exceptional financial hardship faced by LFCC students caused by recent unexpected life events that could affect their continuing education. Examples of emergency situations are: house fire, unanticipated medical issues, homelessness, unanticipated marital separation, and job loss. A list of emergency scholarship funds can be found on page 6.

STEP 1: CAN I APPLY FOR EMERGENCY ASSISTANCE FUNDS?

Please check that you have read and understand each item. Sign here: _____

✓	To be eligible for emergency funds, I must have:
	<input type="checkbox"/> earned a 2.0 cumulative GPA
	<input type="checkbox"/> be enrolled during the current semester for six (6) or more credit hours; preference is given to students who have completed one semester.
	I understand that:
	<input type="checkbox"/> funds are generally not used for tuition, books, professional development courses, or other school-imposed fees; however, exceptions can sometimes be made.
	<input type="checkbox"/> funds will <i>not</i> be issued to students. Instead, the funds will be issued directly to the vendor.
	<input type="checkbox"/> applications are reviewed throughout the year; therefore there is no deadline for applying
	<input type="checkbox"/> dual-enrolled high school students are not eligible to receive these funds
	<input type="checkbox"/> emergency funding is only available to one student per family
	<input type="checkbox"/> emergency funds cannot be transferred to other students. Only the person who applied for and was awarded the funds is eligible to use them.

STEP 2: IF YOU ARE ELIGIBLE TO APPLY FOR EMERGENCY FUNDS, COMPLETE THESE ITEMS BEFORE SUBMITTING YOUR APPLICATION:

✓	I have completed the following tasks:
	<input type="checkbox"/> My unofficial LFCC transcript is attached
	<input type="checkbox"/> I have completed the vendor information on page 3
	<input type="checkbox"/> I have attached separate documentation from the vendor to verify the amount of my request
	<input type="checkbox"/> A representative from the financial aid office has completed page 5.
	<input type="checkbox"/> My instructor has completed page 5.

STEP 3 – SUBMIT APPLICATION TO THE LFCC FOUNDATION

After you have read the eligibility requirements for emergency funds (step 1) and after you have collected the necessary information (step 2), you may submit your application to the LFCC Foundation and schedule a meeting to discuss your request.

Please contact Sue Corno at 540-868-4089 or scorno@lfcc.edu or at the Foundation office in the Corron Community Development Center in Suite 203.

Please complete, sign and return this application to Liv Heggoy, Executive Director, LFCC Foundation, 173 Skirmisher Lane, Middletown, VA 22645.

STEP 4 – IF YOU ARE AWARDED EMERGENCY FUNDS

Please check that you have read and understand each item. Sign: _____

✓	If you are awarded emergency funds, please note:
	Awards will be made based on the availability of funds and the appropriateness of the request.
	The most common mistakes applicants make are: 1. Failing to explain their emergency circumstances in sufficient depth on page 4. 2. Failing to identify a 3 rd -party vendor to issue the award.
	Applicants will be notified of the decision via e-mail.
	The students are required to write a thank-you note or letter to the LFCC Foundation. No funds will be issued without the thank-you note or letter. If the thank-you note or letter is not received by the given deadline, the scholarship will be forfeited.
	The funds will be issued directly to the vendor within ten (10) business days after the student's thank-you note or letter is received.

PROCEED TO PAGE 3 OF THE APPLICATION.

Required Student Information

Full Name: _____
Student ID Number: _____
Street Address: _____
City, State, Zip Code: _____
Telephone Number: _____
E-mail Address: _____

Number of Dependents: _____ Marital Status: _____
Employer name: _____ Your Position: _____

Monthly Income. List below your sources of monthly income and amounts.
(Ex. Job - \$400/week, Child Support - \$75/week, etc.)

Expenses. List below your monthly expenses and amounts (rent, mortgage, utilities, food, gas, car insurance, etc.):

Required Vendor and Request Information

Description of Request: _____
Amount of Request: _____
Vendor Name: _____
Vendor Street Address: _____
Vendor City, State, Zip Code: _____
Vendor Telephone Number: _____
Account Number (if applicable): _____

***Please attach a copy of the documentation related to and verifying your request.**

Please provide an explanation of your exceptional need/circumstances below and why this scholarship is needed:

It is important for LFCC students to apply for college scholarships. The application cycle each year is Jan. 1 – April 1. There are many different scholarships – some are based on need, others are based on academic achievement. Some scholarships are for students from certain counties, while others support individuals studying specific subjects such as nursing or accounting. There is a scholarship for single parents.

If you have not applied for College and Foundation scholarships for the current academic year, please explain why.

By signing below, I certify that: 1) the information on this application is complete, true and correct and 2) I am in need of this funding to continue my education at LFCC. I understand that if I provide inaccurate information, I may be required to repay the money and may not be awarded Foundation scholarships in the future. I understand I must notify the Financial Aid Office if I drop or audit any classes during the semester which I apply.

I authorize the release of biographical information for use in publicity related to the scholarship program. I understand that anything I write as part of my scholarship application may be shared with the scholarship donor and/or used for publicity in College and LFCC Foundation written materials, online information and media opportunities.

I understand that I must attend the Appreciation Dinner in the spring at the LFCC Middletown Campus, and I may be asked to serve as an ambassador, volunteer, or representative of LFCC at events during the year.

Student Signature

Date

**Student must have these sections completed
by the following departments and/or individuals**

LFCC Financial Aid Office Verification

Did the student apply for Foundation scholarships for the current academic year?	<input type="checkbox"/> Yes	<input type="radio"/> No
Did the student receive a College or Foundation scholarship for the current academic year?	<input type="checkbox"/> Yes	<input type="radio"/> No
Amount of scholarship?		
Did the student apply for federal financial aid assistance during the last financial aid cycle?	<input type="checkbox"/> Yes	<input type="radio"/> No
_____ Signature of Financial Aid Office Employee Date		

Instructor Recommendation

Does the student attend classes on a regular basis?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you aware of the student's emergency situation?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do you recommend the student for an emergency scholarship?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
_____ Signature of Instructor Date		
Comments:		

Please contact Sue Corno at 540-868-4089 or scorno@lfcc.edu or at the Foundation office in the Corron Community Development Center in Suite 203 to schedule a meeting.

The Foundation has the following emergency scholarship funds:

- **Bob Sowder Emergency Scholarship Fund**

In 2008, the Bob Sowder Emergency Scholarship Fund was established by Bob Sowder. The fund allows LFCC students who live in Fauquier County to apply for monies to be used immediately and in the event of an emergency. Part-time and/or full-time LFCC students who live in Fauquier County may apply for these funds.

- **Emergency Fund for Health Professions Students**

In 2008, the Emergency Fund for Health Professions Students was established by generous donors. The fund allows health professions students to apply for monies to be used immediately and in the event of an emergency. Part-time and/or full-time LFCC health professions students may apply for these funds.

- **Helping Hand Emergency Scholarship Fund**

In 2005, the Helping Hand Emergency Scholarship Fund was established by the LFCC Educational Foundation Board. The fund allows students to apply for monies to be used immediately and in the event of an emergency. Part-time and/or full-time LFCC students may apply for these funds.

- **O'Shaughnessy-Hurst Memorial Foundation Emergency Scholarship Fund**

In 2007, the O'Shaughnessy-Hurst Memorial Foundation Emergency Scholarship Fund was established by the O'Shaughnessy-Hurst Memorial Foundation. The fund allows LFCC students to apply for monies to be used immediately and in the event of an emergency. Part-time and/or full-time LFCC students may apply for these funds.

<u>For Foundation Use Only</u>			
Foundation Meeting:			
Did the student schedule and attend a meeting? Meeting date:]]	Yes]]
			No
Funding Decision:			
Did student legitimize his or her financial need?]]	Yes]]
Will the student serve as a good ambassador for the Foundation?]]	Yes]]
Amount Awarded	Decline Request		
Additional Comments:			
Decision made by:			
Signature:		Date:	