

CONFIDENTIAL

Office use only
Application Date: _____

Meeting Date: _____

Student Emergency Fund Application

Emergency Fund application requirements:

- Available on a one-time basis for emergencies only.
- Funding requests for school related expenses such as tuition, books, or bridge financing (waiting for a student loan, lack of financial planning) will not normally be considered.
- Funding for school related expenses will only be considered if the student can demonstrate a clear emergent circumstance outside of their control that has impacted their financial situation.
- The Emergency Fund Application committee has the right to request official proof of paid receipts, invoices, or official documentation (e.g. doctor's note, pictures) related to the emergency.
- Non-repayable.
- Money is put directly into the student's BU account by Financial & Registration Services or a cheque is issued to the student.
- Students will be considered for the following funds:
 - Supplementary Undergraduate Student Assistance Trust Fund (SUSA)
 - John & Paula Mallea International Student Emergency Fund
 - Tena Sorenson Memorial Bursary
- Turn in the application to Student Services, Main Office, Rm. 105, or email to lohrl@brandonu.ca.

Name _____ Student # _____

Address _____ Faculty _____

SIN # _____ Cr. Hrs this term _____

Phone _____ Email _____

Application Requirements:

1. Please indicate the number of persons living in your home, their relationship to you and their ages.
2. Please explain why you need assistance at this time (that is, what circumstances have resulted in your financial emergency).
3. Please indicate the amount of assistance you are requesting and the specific expenses for which the funding will be used. Please include copies of any paid receipts, or official invoices.

4. Do you have a bank debit card: YES _____ NO _____

5. Please list your financial resources for the current term:

a. Total amount of:

Student Aid _____

B.U. Scholarships or Bursaries _____

Summer Savings _____

b. Amount received monthly from:

Part-time work _____

Parental contribution _____

Partner's Income _____

Sponsor or other agency _____

c. Other sources of income _____

(eg: tax refund, child tax credit)

6. Please identify your expenses for the current term:

| | Amount Paid to Date | Amount Currently Owing |
|--------------------|---------------------|------------------------|
| Tuition and fees | _____ | _____ |
| Books and supplies | _____ | _____ |
| Residence charges | _____ | _____ |
| Rent (monthly) | _____ | _____ |

| Utilities (please specify) | Amount Paid |
|----------------------------|-------------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

Childcare expenses (monthly) _____
Transportation costs (monthly) _____
Other (please specify) _____

7. If you own a car, please indicate model and year _____

8. Have you applied for a J.R.C. Evans loan through the Alumni Office? **Yes** _____ **No** _____

9. Should it be necessary for the Dean of Students to verify information with any agencies or individuals named in this application, I hereby grant permission to Student Services to do so. I understand that all information will be kept strictly confidential within the Trust Fund Committee.

Date _____ Signature _____

The university collects the personal information on this form pursuant to the Brandon University Act and The Freedom of Information and Protection of Privacy Act. The information you provide on this form is used for purposes of determining your eligibility for assistance. If you have questions about the collection, contact Student Services at 727-9739 or Studentservices@brandonu.ca.