

Cincinnati Law Student Emergency Fund Application

Name:

M#:

Email:

Phone:

Academic Program:

Year:

How many credits are you enrolled in at the time of application?

Are you currently attending your classes regularly?

Please describe the emergency or crisis situation that is posing an unexpected financial hardship for you:

Please describe the type and amount of expense for which you are requesting emergency funding. Attach to this application form documentation of the expenses for which you are requesting funding, and any other documentation that will assist the Office of Student Affairs, in understanding your situation.

Which of the following possible resources have you utilized or investigated to assist you through this hardship? (Please check all that apply)

- Employment income
- Student loans
- Student scholarship
- Loans or gifts from family members
- People who owe me money
- Personal financial accounts
- Public benefits or other community resources
- Other (please explain):

By signing below, I acknowledge that I have read the eligibility information and confirm that the information provided above (and attached, if applicable) is accurate to the best of my knowledge.

Applicant Signature

Date