Brooklyn College
Carroll and Milton Petrie Student Emergency Grant Program (as of 10/7/09)

Application

The Brooklyn College Carroll and Milton Petrie Student Emergency Grant Fund Program seeks to assist eligible students coping with an unexpected hardship, so that they may continue their education at Brooklyn College and become financially aware and responsible for their continued education. This program's long-range goal is to ensure access to the widest range of students its available financial resources with the goal of student retention and graduation.

The Brooklyn College Foundation, the recipient of this grant fund from The Carroll and Milton Petrie Foundation, co-sponsors this program with the Division of Student Affairs.

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The information requested below will help determine your eligibility for this grant. You will be contacted if there is a need for any additional documentation verifying the emergency nature of your situation.

Please Print:

Date of Request: _____   Amount Requested *(Maximum $1,500)*: _____

Applicant's Name: _____   EMPL ID: _____

Student Status: _____ Graduate _____ Undergraduate   Grade Point Average (GPA): _____

Cell/ home phone: _____   E-mail address: _____

1. Please give a detailed explanation of the **nature of the emergency**, and how the grant you are requesting will be used to alleviate the situation? Documentation should be included supporting your claim. (*If you need more space, turn over.*)

   _____

   _____

   _____

   _____

   _____

2. Please provide a **budget breakdown** of the amount requested above (e.g., medical bills, housing, etc.). There should be a budget line item for each item requested and documentation of the price for each item must be included (*for example, request for eye glasses should include an invoice from eye doctor*).

7.30.15

3. Do you have insurance (e.g., medical, auto) that would cover all or part of these expenses?

_____Yes   _____No

4. What efforts have you made to find financing from other sources?

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5. Have you applied for a scholarship?

_____Yes   _____No

6. If this is <u>not the first time</u> you have requested emergency funding from Brooklyn College, please indicate when and what other funds you have requested and received?

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I, the undersigned, certify that the information provided on this application is accurate, and understand that providing false information may result in my application automatically being disqualified.

_____   _____
Applicant Signature   Date

_____
Applicant Name (please print)