

HEERF Grant Application



**Emergency Financial Aid Grants to Students
Under the Coronavirus AID, Relief, and Economic Security (CARES) Act**

The U.S. Department of Education has made Emergency Financial Aid Grants to students of our institution who need financial support for their expenses related to the disruption of campus operations due to Coronavirus. This application permits students to apply for these need-based grants. Campus administration will use the information you provide here to determine your eligibility for a grant and the amount for which you will be eligible. Each student will be eligible for only one grant, and only one application will be considered per student. Please fill out this information neatly and completely and provide it to the School's Financial Aid Office directly or via email to heerf@lamson.edu. Only active students who are participating in their modules or courses in their program and who are in good standing will be eligible to receive a grant.

Student Name: _____ Email: _____

Postal Address: _____ City: _____ State: _____ Zip: _____

Student ID No: _____ Phone Number: _____

Have you incurred expenses due to disruptions caused by the Coronavirus pandemic? ____ Yes ____ No

Check all situations that apply to you.

- I am financially responsible for my food expenses.
- I am financially responsible for my housing expenses.
- I am financially responsible for expenses related to my course materials to attend school.
- I am financially responsible for paying for technologies associated with attending online classes.
- I am financially responsible for my own health care costs.
- I have children and am financially responsible for childcare expenses.

If I am approved to receive an emergency financial aid grant, I understand that I will receive a check from the School. I agree I will pick up my check from the Business Office once I am notified.

I certify under the penalty of perjury that the information I provided on this application and each of the following statements are true and accurate. I am requesting a one-time Emergency Financial Aid Grant to help cover the cost of expenses incurred due to the Coronavirus pandemic. I am eligible to receive this grant because I am (a) currently enrolled in a program leading to a degree or certificate at the School; (b) I am currently making satisfactory academic progress as described in the School's Satisfactory Academic Progress Policy published in the School's catalog; (c) I do not owe a refund on any federal grant that I

received as part of my financial aid package at the School and I am not in default on any federal student loan that I have received; (d) I am a U.S. citizen or national, a citizen of the Freely Associated States (the Federated States of Micronesia and the Republics of Palau and the Marshall Islands), or I am a lawful permanent resident of the United States or other category of non-citizen eligible to receive federal financial aid; and (e) I have never been convicted of, or have ever pled nolo contendere or guilty to, a crime involving fraud in obtaining federal financial aid funds. I understand that I will be unable to revise this request after submitting it, and I understand that the administration of my school will determine my eligibility for grant monies based on my responses to the questions above. I acknowledge that if I were to purposely give false or misleading information in connection with this application, I may be in violation of federal and state laws, and I will have to repay any grant funds I received for which I was not eligible, in addition to other penalties under applicable law.

Student Signature

Date

Office Use Only:

Financial Aid Review:

ISIR Rev No. is: _____

Student eligible: (circle one) [Active in good standing on March 13, 2020]

[Active in first module/course between 3/14/2020 and 3/31/2020]

[Re-entering and active between 3/14/2020 and 3/31/2020]

Student Not eligible: (circle one) [Not in good standing]

[Unresolved FA eligibility issues on ISIR]

[Other]:

(state reasons)

Approved Grant Amount: \$ _____

Reviewed and Approved:

Financial Aid Officer: _____
Financial Aid Approver Name, Signature, and Date

Reviewed and Approved:

Financial Aid Director: _____
Financial Aid Director Name, Signature, and Date