

Student Support Foundation

Application for Financial Assistance

Form updated 05/26/09

Do not write in box/PSU office use only

Name: _____

Local Address: _____

City/St/Zip: _____

Cell Phone: _____ Email: _____

Current Year in School (1st, 2nd, so forth): _____ Live: On campus Off campus

Undergraduate student Graduate student Part-time Full-time

How did you find out about the Student Support Foundation? _____

Student ID# _____
<input type="checkbox"/> Grant Awarded
<input type="checkbox"/> Grant Declined

In submitting this application, I agree to the following conditions:

1. The SSF has been set up to help students with financial emergencies.

I have read the funding guidelines. My request involves a financial crisis that could be relieved by an SSF grant.

2. SSF members of the student board and program advisors are bound by a signed agreement to maintain the strictest confidentiality regarding information disclosed by students requesting grants. The members of the student board will receive information about your request but will never know your name.

I am disclosing the amount of detail necessary to help the board make an informed decision about my emergency situation. If the emergency is medical, I waive my right to confidentiality only for the information I choose to disclose and only to the SSF board and advisors.

3. The SSF attempts to meet all grant requests. However, grants are funded through applications and there is a possibility that the student board might reject a request.

I accept that my request may or may not be funded, and I hold no SSF members or program advisors liable for the final decision.

4. The SSF funds only specific needs. (Refer to the "Funding Guidelines," found at <http://www.plymouth.edu/campmin/ssf/guidelines.html>, for details.)

If awarded a grant, I will provide the SSF advisors with receipts documenting my purchase(s) with this money.

Return completed form via email to
student.support.foundation@plymouth.edu.

For questions or more information, contact
Preston Fuller plfuller@plymouth.edu (535-2327)
or
Kathy Tardif kmtardif@plymouth.edu (535-2673)

Student ID# _____
____ Grant Awarded
____ Grant Declined

Student Support Foundation

Amount requested (\$25-\$200): \$_____ For what: _____

Date funds are needed by: _____

Why is this an emergency? _____

How did this emergency come about? _____

Have you applied for an SSF grant before? _____ If yes, when and for how much?
_____ Why do you need another grant? _____

Specifics of Your Request

If you need money for gas, specify where you need to drive (miles and frequency).

If you need money for food, specify: Where are you getting food now? What items do you plan to purchase? How long will you need assistance with food?

If you need books, go to the Textbooks section at the end of this application and fill out the titles, prices, and sources of the books you cannot afford.

For other items, please provide details of the costs, adding more lines as needed:

Item*	Specific Cost
_____	\$ _____
_____	\$ _____

* Refer to the "Funding Guidelines," found at <http://www.plymouth.edu/campmin/ssf/guidelines.html/>.

Resources You Have Explored and Exhausted

Have you asked a parent or legal guardian for help? _____ If yes, what was the answer? If no, explain in detail why not. _____

Are you currently employed? _____ If yes, is it through work study? _____

What is your monthly income? \$_____

If you are facing an outstanding or large bill (such as a medical bill), have you requested and set up a payment plan? _____ If not, why not? _____

If yes, what is that payment plan per month? \$_____

Can you borrow money, books, or supplies from relatives or friends? _____. If no, explain in detail why not. _____

Have you applied or been granted funds from any other PSU office?

If yes, please list office and amount awarded: _____

Have you applied or been awarded funds from outside sources? If yes, please list: _____

Plans for Resolving This Financial Crisis

What are your plans for getting out of this financial emergency? _____

What will you do if you are not granted your request? _____

Is there anything else you would like the SSF student board to know about your situation?

Applications will be reviewed anonymously by the SSF student board.

The board is staffed by full-time students who volunteer to serve on the board.

Most requests will be decided in approximately four working days.

In the case of dire emergency, the SSF board will make every effort to respond to requests within 48 hours.

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Textbooks

In addition to answering pertinent questions on the application, create a detailed list of all textbooks for which you are requesting a grant. Place it on this page using the format provided, adding and subtracting lines as necessary. Look for used books from inexpensive sources (examples include bigwords.com, half.com, Amazon.com, or Plymouth Book Exchange on Main Street). List each title and price from each source you plan to use.

If you are looking for books online, be sure to include shipping and handling costs. To see those costs, order the books without pressing the final Submit button so that you can view all the prices and the shipping and then Select-All and copy the page into a Word document. Transcribe the information onto this page.

Date Textbook List Created: _____

Source #1 where textbook(s) can be purchased:

Title	Cost	Date Needed on Syllabus
_____	\$ _____	_____
_____	\$ _____	_____
Shipping & Handling (if applicable)	\$ _____	
Total for Source #1	\$ _____	

Source # 2 where textbook(s) can be purchased: _____

Title	Cost	Date Needed on Syllabus
_____	\$ _____	_____
_____	\$ _____	_____
Shipping & Handling (if applicable)	\$ _____	
Total for Source #2	\$ _____	
 Grand Total from all Sources Listed	 \$ _____	