

Washburn University Counseling Services and Advocacy

Student Emergency Assistance Application

Student emergency assistance awards are granted from the Student Emergency Fund by Ichabods Moving forward, a student-led philanthropic organization sponsored by both Washburn University Alumni Association and Foundation and the Office of Student Life. Funding is made possible through the generosity of our students, faculty, staff and friends.

Description

The Student Emergency Fund is available to help students who experience unexpected and unforeseen circumstances which jeopardize their ability to continue their education. Assistance may be granted to students who have demonstrated a need for temporary financial assistance to remain a student at Washburn University. Emergency funds are limited, and availability varies based on fund balance. Assistance may only be granted once during a student's time at Washburn University.

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|-----|-----|-------|-----|--------|-------|
|-----|-----|-------|-----|--------|-------|

| I am a current, degree-seeking student at Washburn University |
|--|
| ☐ I have applied for other support through the Financial Aid Office |
| ☐ I am in good academic standing (minimum of 2.0 GPA) |
| \square I have exhausted all available loan, scholarship, grant/work opportunities |
| My tuition balance does not exceed \$2,500 |

Only eligible applicants will be submitted to the Executive Council for review.

Application

Please complete the Emergency Assistance Application found at https://www.washburn.edu/student-life/services/emergency-assistance-awards.html and send supporting documentation to imf@washburn.edu. When submitting documents, please redact sensitive information (i.e. SSN, Banking Account Number, etc.). The maximum to be allotted to eligible and approved applicants is \$599.

We accept student referrals! Please submit your student in need to imf@washburn.edu. We will contact the student to complete the application for assistance. All referrals are kept confidential. Applications may be completed online or printed and turned into Washburn University Counseling Services and Advocacy.

1835 SW Jewell Suite 200 Kuehne Hall Topeka, KS 66621

Questions? Please call 785-670-3100, option 1 or email imf@washburn.edu

Applications are reviewed by the Ichabods Moving Forward Executive Council or the law committee for law students. We review applications Monday through Friday from 8am to 5pm. If submitted during normal business hours, applications are typically reviewed within 2 business days. All student information is kept confidential. While we strive for prompt action, please understand, the funding process may take up to 2 weeks. Invoices, estimates, and other supporting documentation are required.

All final funding decisions must be approved by Ichabods Moving Forward Leadership. Assistance awards are reported to Washburn University Financial Aid and may impact future financial aid.

Student Emergency Assistance Fund Application

| | | Date: |
|--|--|----------------------------|
| Name: | WIN#: | |
| Washburn Email: | Phone Number: | |
| Complete Mailing Address: | | |
| Class Standing: Freshman S | Sophomore O Junior O Senior | Graduate Student |
| Major/Program of Study: | | |
| Expected Graduation Date: Amount Needed: \$ | Current Academic Advisor | |
| If awarded, can Ichabods Moving For assistance? Yes No | orward contact you for a statement about | how you benefited from the |
| Have you received assistance from | Ichabods Moving Forward in the past? Ye | es No |
| Statement of Need (2 - 4 sentences Specify what this temporary financi statements, and/or estimates relate | ial assistance would be used for. Please inc | clude any invoices, |

Future Outlook (250 words or less)

Describe how this assistance will impact your future at Washburn University. Is your current emergency situation impacting your ability to continue classes? If so, how will this assistance ensure you continue toward graduation? Please include any work you plan to acquire, loans you will receive, etc.

Budget Proposal (See form attached)

Please give an estimated budget of the assistance you are requesting. Please attach any receipts, bills or estimates for your expenses. *Invoices, statements and/or other documentation will be required for payment.*

Budget Proposal

| Are you currently employed? | \bigcirc | Yes | ○ No | |
|-----------------------------|------------|-----|-----------------------|--|
| If so, monthly income: | | | Employer name: | |
| Marital status: | | | Number of dependents: | |

| Source | Amount (\$) |
|----------------------------------|-------------|
| Earnings of Student | |
| Earnings of Spouse | |
| Parent's contribution | |
| Savings | |
| Child Support Received | |
| Financial Aid | |
| Scholarships/ Grants | |
| Other Income (please list below) | |
| | |
| | |
| | |
| Total Income per month | |

Estimated Costs (per month)

| Expense | Amount (\$) |
|------------------------------------|-------------|
| Rent/Mortgage | |
| Food | |
| Transportation | |
| Utilities | |
| Child Care | |
| Cell Phone | |
| Cable/Internet | |
| Tuition/ Books/ Fees | |
| Other Expenses (please list below) | |
| | |
| | |
| | |
| Total Expenses per month | |

Student Financial Information Form

Student Emergency Assistance Application

| | ve permission to the Office of Student Financial |
|---|--|
| Aid and Scholarships to release financial information and a Moving Forward regarding any financial support I may have | |
| Information provided by Office of Student Financial Aid and | |
| and will remain strictly confidential. Please note, any award | Is received from IMF must be noted in your |
| financial aid record and may impact future funding. | |
| | |
| | |
| | |
| Signature | |
| | |
| | |
| | |
| Date | |
| Applicants DO NOT compl | ete the lower portion. |
| This will be completed by Washburn University Alumni Ass | • |
| | |
| | |
| | |
| To be completed by the Financial Aid Office. | |
| | |
| Has the student exhausted all other funding avenues? Yes | No |
| | |
| | |
| | |
| | |
| Printed Name of Financial Aid Office Associate | Signature |
| | |
| | |
| Data | |