



California Institute of Integral Studies

CARES ACT Emergency Grant Application

The Coronavirus Aid, Relief and Economic Security (CARES) Act allocates funds to support individuals and businesses/organizations affected by the pandemic and economic downturn. The Act includes several sources of funds for colleges and universities, including the Higher Education Emergency Relief Fund. CIIS will receive funds under this CARES ACT to provide emergency grants to students for "expenses related to the disruption of campus operations due to coronavirus (including expenses under a student's cost of attendance, such as food, housing, course materials, technology, and childcare)."

The federal government has set criteria for eligibility only to students who have already or are eligible to complete the FAFSA form. Federal guidelines have stated that students in online programs are not eligible for the grant. The amount of funding allocated to CIIS is fixed at \$176,178.00. Students must be enrolled at CIIS during the Spring or Summer 2020 semesters and must show a loss of income or financial hardship due to COVID-19. Additional factors considered by the review committee may include student and/or family income, dependents, and fixed expenses. The request for emergency funding will be reviewed by a committee composed of representatives from the following offices: Financial Aid, Student Affairs, Office of Diversity and Inclusion, and Academic Affairs. Information disclosed will be kept confidential.

Please email your complete application to caresact@ciis.edu. The PRIORITY DEADLINE is 05/08/2020. Note that it is very likely that all funds will be distributed at this time. Applications received after the priority deadline will be reviewed if there are remaining funds.

Name and Address: *(please print legibly)*

CIIS ID Number: _____

CIIS E-mail Address: _____

Phone: _____

Semesters you are or will be enrolled at CIIS (check all that apply): Spring 2020 Summer 2020

Requested dollar amount (maximum amount of \$1,500): _____.

For following expenses due to the disruption of campus operations (list all that apply):

Check all that apply and describe the grounds upon which you are requesting emergency funding.

As an outcome of a government mandate (i.e. shelter-in-place), my income was reduced or eliminated.

I was unable to work because I or someone in my household was quarantined due to a positive COVID-19 test or possible exposure to COVID-19.

Other

Student Signature: _____ Date: _____

DATE RECEIVED: _____ DATE REVIEWED: _____ APPROVE DENY FOLLOW-UP NEEDED: _____

DATE DECISION COMMUNICATED: _____ DATE FUNDS DISBURSED: _____