

Graduate College
University of Illinois at Chicago

Emergency Grant Application

Emergency grants may be available to degree-seeking graduate students who experience an acute and unexpected short-term hardship (e.g. significant reduction or disruption in salary, unexpected unreimbursed medical bills). Award decisions will be made based on the applicant's individual situation but amounts awarded are subject to limitations. Grants will generally be a maximum of \$500 due to limited funds available. Applicants must state the amount requested and provide documentation to support that amount. Funding for this grant comes from the Student-to-Student fee assessed to graduate students.

Applicants must be degree-seeking graduate students registered for a minimum of eight (8) hours, three (3) if applying in summer, for the term in which the grant is being requested. The grant is not subject to repayment. The amount of any awarded grant will be reported on tax form 1098-T. The grant may be considered taxable income and students are encouraged to contact a tax professional to make a determination on whether or not this grant is taxable. Federal loans may be reduced by the amount of this award, although this grant does not require re-payment or charge interest. Students will be awarded at most one Emergency Grant within a twelve (12) month period.

Applications, including all supporting materials, should be submitted in one package to the Graduate College, 606 University Hall. Additional information may be requested.

1. **Applicant Name:** _____
(Last/Family) *(First/Given)* *(Middle)*

2. **UIN:** _____

3. **Email Address:** _____ **Phone:** _____

4. **Local Address:** _____

5. **Academic Program:** _____ **Adviser:** _____

6. **Degree sought/expected date:** _____/_____ **Term/year of first graduate enrollment at UIC:** _____

7. **Academic term/year for which you are requesting grant:** _____

8. **Total hours of registration for term requesting grant (must be minimum of 8 hours, 3 in summer):** _____

9. **Amount of grant requested: \$** _____

10. **Which of the following do you have during the term you wrote in question 7 (check all that apply)?**

Fellowship _____ **Assistantship** _____ **Other Campus Employment** _____ **Off-campus Employment** _____

11. **List monthly expenses:**

Housing, including utilities \$ _____ **Food \$** _____ **Childcare \$** _____

Commuting costs \$ _____ **Car Payments \$** _____ **Book /Supplies \$** _____

Other (specify) \$ _____

TOTAL MONTHLY EXPENSES \$ _____

12. Have you received student loans for this term? No _____ Yes _____

If yes, please be advised that the grant may result in an adjustment of your loan eligibility up to the amount of the grant.

13. Are you responsible for any student or personal loans? No _____ Yes _____

	Description of Loan	Balance	Monthly Payment
a.	_____	\$ _____	\$ _____
b.	_____	\$ _____	\$ _____
c.	_____	\$ _____	\$ _____

14. How did you learn about the availability of the Graduate College Emergency Grant?

15. Specify below (or attach a signed explanation) of the acute, unexpected expenses, and the reasons you believe your situation warrants the award of this grant. Attach supporting documentation (copies of insurance statements/doctor's bills/earnings statements/etc.). **NOTE: BLACK OUT ANY SOCIAL SECURITY OR INSURANCE ID NUMBERS.**

Signature of Applicant: _____ Date: _____