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**AIAM CARES Act Emergency Student Grant Application**

**Section 18004 CARES Act - Student Application for Emergency Aid, Spring 2020**

First step, to be completed by Student:

The U.S. Department of Education has made Emergency Financial Aid Grants available for AIAM students who need financial support for their expenses related to the disruption of campus operations due to Coronavirus. **By submitting this form by May 15, I am requesting an emergency student aid grant.** I understand that any money awarded from this grant is to be used for expenses related to the disruption of campus operations due to coronavirus. These expenses include eligible expenses under a student's cost of attendance in the calculation of Federal Financial Aid, such as food, housing, course materials, technology, health care, and childcare. I understand that The Secretary of Education does not consider these individual emergency financial aid grants to constitute Federal financial aid under Title IV of the HEA.

If you want to apply, please fill out this information and sign it electronically. Each student will be eligible for only one grant, and only one application will be considered per student. Only active students in good standing who are actively participating in courses will be eligible to receive a grant.

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Mailing Address for the check : \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_ Email: \_\_\_\_\_

AIAM Student ID: \_\_\_\_\_ Find this in Populi - My Profile tab -> Student tab -> Student Information section (right side)

Last Four Digits of SSN: \_\_\_\_\_ Phone Number: \_\_\_\_\_

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

Check **all** situations that apply to you\*\*:

\_\_\_ I have children and am financially responsible for childcare expenses

\_\_\_ 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 my own health care costs

\_\_\_ I am financially responsible for paying for technologies associated with attending online classes

*\*\* Thank you for providing this, it will be used to determine total student need and to determine fair allocations of the limited funds provided.*



I give my consent to AIAM to use the information provided herein for the purpose of calculating the award of emergency financial aid in accordance with the CARES Act.

**I attest that all information is true and accurate**, and I am requesting a one-time Emergency Financial Aid Grant to help cover the cost of expenses incurred due to the Coronavirus pandemic. I understand that I will be unable to revise this request after submitting it, and I understand that AIAM administration will determine my eligibility for grant monies based on my responses to the questions above.

Student E-Signature \_\_\_\_\_ Date \_\_\_\_\_

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*Second Step to be completed by AIAM:*

AIAM Approval E-Signature: \_\_\_\_\_ Approval Date: \_\_\_\_\_  
Grant Award: \_\_\_\_\_

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*Note to student: This section will come for e-signature later when your grant is awarded.*

Third step, to be completed by Student:

I accept the Grant Award provided to me from funding made available to my institution under the CARES Act.

I certify the following:

- All information provided as part of this application is true and correct to the best of my knowledge.
- I am eligible for Title IV Federal Financial Aid.
- I understand that any money awarded from this grant is to be used for expenses related to the disruption of campus operations due to coronavirus. These expenses include eligible expenses under a student's cost of attendance in the calculation of Federal Financial Aid, such as food, housing, course materials, technology, health care, and childcare. The money I am receiving is intended to cover my expenses related to the disruption of campus operations.

Student Acknowledgement E-Signature: \_\_\_\_\_ Date \_\_\_\_\_

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*Fourth Step to be completed by AIAM:*

Accounts Payable E-Signature: \_\_\_\_\_ Amount Approved: \_\_\_\_\_  
Check number: \_\_\_\_\_ Date mailed: \_\_\_\_\_