Application for CARES Act Emergency Funds

The purpose of this grant is to provide students who are at risk of not continuing their education due to an ongoing impact of the COVID-19 health crisis. You must be enrolled for Spring 2021 semester to apply.

NAME: ________________________  LC State Student ID#: __________________

You must file a FAFSA?  ___ 2020-2021 for Spring requests

Requesting assistance for: ___ Spring Semester 2021– deadline Friday, April 30, 2021

I have been financially impacted by COVID-19 due to:

___ Unexpected relocation expenses due to campus closure
___ Personal job loss/reduction of hours
___ Family or tuition payer job loss
___ Personal/family COVID-19 illness
___ Other:____________________________

I am requesting assistance with the following:

___ Technology needs (computer, internet, etc)
___ Course materials
___ Housing/Food costs/Utilities
___ Current tuition/fee balance due
___ Required COVID-19 Testing
___ Other: _____________________________

I am requesting the following amount in grant funding:  $___________
(Emergency funds are limited. Approved amounts may be less than your request)

Please provide the answer the below questions in detail:

What expenses/needs will the grant funds cover?

How has COVID-19 created a barrier to your ability to complete the current semester courses?

Supporting documentation must be attached.  (Documentation may include, but not limited to, letters of employment termination or reduced hours, receipts for increased food costs or utilities.)

Submit completed application to:    LCSC Financial Aid Office    Fax: 208-792-2063
                                   500 8th Avenue    Email: caresact@lcsc.edu
                                   Lewiston, ID 83501