

860-906-5212

ca-equitycenter@capitalcc.edu

The purpose of the Emergency Microgrant is to assist you in overcoming a financial emergency so you can then focus on your studies. Equity Center staff can assist you with removing other non-academic barriers to success.

Please note: We will review your application as soon as possible. However, the payment process may take up to three weeks. You will receive an email once your application has been approved. Thank you for your patience and understanding.

Microgrants are funded primarily by the Capital Community College Foundation.



Finances



Health



Housing



Utilities



Food



Transportation



Legal Services

GUIDELINES

- Microgrants awarded to students range from \$50 – \$500. **(One time per student)**

Emergency or hardship needs include, but are not limited to:

- Threat of eviction
- Overdue utility bills/turn-off notice
- Theft of computer or books
- Medical/Dental bills (not covered by insurance)
- Overdue Childcare bill
- Automobile repairs
- Other (you may explain your emergency in personal statement)

Not Eligible:

- To cover previous college debts or school fees
- To pay a credit-card balance
- To pay for legal representation
- This funding is not intended to replace existing financial aid

Applicants must:

- be a currently enrolled student in good academic standing (2.0 GPA and above)
- complete all questions in full on the application and submit supporting documentation.
- attach the bills or copies of bills that need to be paid (up to \$500).
- Complete the Single Stop Screening to learn about all the entitlement programs and resources for which you and family may be eligible: <https://app.singlestop.org/capitalcc/main>
- On Financial Avenue, complete two modules: Psychology of Money and Foundations of Money <https://inceptia.instructure.com/enroll/MDGRM6>
- Grants do NOT have to be repaid.

Please fill out the application on the other side.

Return to Equity Center, Room 314, with required documents. If no one is there, drop it in the brown document box near the door.

Student Information

Date of Request: _____ Amount of Request _____ (maximum \$500)

Student ID # _____ Date of Birth _____

First Name _____ MI _____ Last Name _____

Address _____

City/Town _____ State _____ Zip _____

Telephone _____ College Email _____

Academic Major/Program: _____ Expected Graduation Date: _____

Are you currently receiving financial aid or scholarships? YES NO

Have you completed Single Stop Self Screen? YES NO

Have you completed the Financial Avenue modules? YES NO

Please indicate household income if available _____

REQUIRED: Attach any documentation available: medical bill, eviction notice, unemployment notice or similar information that can be verified to support the request.

Briefly explain the nature of the immediate need or hardship (Use additional page if necessary. If handwritten, please write clearly.)

I swear that the information provided in this application is true.

Applicant Signature

Date

Equity Center For Office Purposes Only

Date received: _____

Cumulative GPA: _____ Approved By: _____

Approved \$ _____ Denied ___ Reason: