

# Application for CARES Act Funding (COVID-19)

## PERSONAL INFORMATION

FIRST NAME: \_\_\_\_\_ LAST NAME: \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_

STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

STUDENT ID NUMBER: \_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

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## EXPENSES RELATED TO COVID-19 DISRUPTIONS

Please list the expenses for which you are requesting CARES funds (e.g., Internet service for \$60).

Permissible expenses include food, housing, course materials, technology, health care, and child care related to campus disruptions caused by COVID-19.

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## DEPOSIT INFORMATION

Are you currently employed by Westminster (e.g., work study)? Yes No

If you are employed at Westminster, are you set up to receive direct deposits? Yes No

If you are NOT employed at Westminster or set up to receive electronic funds currently, please provide your bank name, banking account number, **and** routing number if you prefer direct deposit.

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Have you completed a FAFSA?      Yes      No

Have you previously applied  
to receive Westminster's  
CARES Act funding for  
COVID-19?      Yes      No

**APPLICATIONS SHOULD BE SUBMITTED BY JUNE 15, 2020.**

**To submit your application:**

- 1. Save a copy to your computer for your records.**
- 2. Email the form as an attachment to CARESActFunding@westminster.edu**

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**TO BE COMPLETED BY WESTMINSTER COLLEGE STAFF**

Title IV eligibility notes:

Total funding requested:

Total funding approved:

Approved by/date: