

## Undergraduate Student Microgrant Information

### Dean of Student Main Office

The University of Massachusetts Amherst Undergraduate Student Emergency Grant Fund Program seeks to provide emergency microgrants to matriculated undergraduate students in good standing for unexpected financial emergencies, hardship, and/or unforeseen personal/family emergencies.

To apply for a microgrant, students must complete a **Microgrant Application**. Applications can be found on the following web site: [http://www.umass.edu/dean\\_students/dean-students-office-forms](http://www.umass.edu/dean_students/dean-students-office-forms)

- Provide all requested information, sign, and date the application
- Answer all questions
- Include any relevant documentation:
  - Receipts directly related to the emergency expense
  - Proof of loss of job, income, etc.
  - Proof of damages incurred
- Complete the Budget Sheet
- Drop-off application to the Dean of Students Main Office in Whitmore 227

The UMass Amherst Undergraduate Student Emergency Grant program is funded with donations the Student Care and Emergency Response Fund, <https://minutefund.umass.edu/project/5670>. Funding is limited each semester. Therefore, it is possible that every microgrant request will not be funded. Some of the reasons request are denied include but are not limited to:

- Incomplete Application
- Application lacks supporting documentation
- Application does not clearly explain how the grant will resolve the described financial emergency
- The student is not an active undergraduate student according to enrollment information.
- The student's Bursar bill is unpaid, or the student is delinquent in a payment plan.
- The student has other holds in their SPIRE account which prevents enrollment or the Add/Drop of classes.
- The student is already at the maximum financial aid allotted for the semester (i.e., the financial aid award has already met the calculated "unmet need").
- The student is not making sufficient academic progress (credits earned) or, the cumulative GPA is less than 2.0.
- Insufficient funds available in the fund.

**Note:** A student may apply for a short-term loan from the Dean of Students Main Office pending a decision regarding a microgrant application, **which may take up to two weeks to review**.

- If a loan is approved, the student must have an alternative plan to pay back the loan if the microgrant is denied.
- If the microgrant is approved, the student must agree to use the grant to pay back the short-term loan.
- Please contact the Dean of Students Main Office (227 Whitmore Administration Building) for more information about emergency loans.

## Undergraduate Student Microgrant Application

### Dean of Student Main Office

The **University of Massachusetts Amherst Undergraduate Student Emergency Grant Fund Program** seeks to provide emergency microgrants to matriculated undergraduate students in good standing for unexpected financial emergencies, hardship, and/or unforeseen personal/family emergencies.

- The program's long-range goal is to ensure access by the widest range of students in need. This grant fund is made possible by generous donations to the [Student Care and Emergency Response Fund](#).
- The Dean of Students Main Office staff administratively manage the program by reviewing and awarding grants by a Committee to eligible students on a case-by-case basis. A student may be awarded only once per academic year. The maximum amount for a grant is \$500.

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*The information requested below will help determine your eligibility for this grant.*

Date of Request: \_\_\_\_\_ Amount Requested: \_\_\_\_\_  
(Maximum \$500)

Student First & Last Name: \_\_\_\_\_

SPIRE ID #: \_\_\_\_\_ Primary Academic Major: \_\_\_\_\_

Local Address: \_\_\_\_\_

Permanent Address: \_\_\_\_\_

Cell/Home phone: \_\_\_\_\_ UMass Amherst Email: \_\_\_\_\_

I am currently registered for \_\_\_\_\_ credits

Expected Graduation: \_\_\_ Spring / \_\_\_ Summer / \_\_\_ Fall, 20\_\_\_\_\_

Cumulative GPA: \_\_\_\_\_

1. Briefly explain the nature of your financial emergency, and how the grant you are requesting will be used.  
*(If you need more space, please use other side or attach statement).*
2. How would this grant assist you in overcoming the financial emergency you are facing?
3. Do you have documentation of the above emergency, or can you obtain such documentation (e.g., police report, medical bill, court dispossession notice, unemployment notice, etc.)?  
\_\_\_\_\_ Yes \_\_\_\_\_ No
4. What efforts have you made to procure financing from other sources?

5. Please complete this budget sheet so the Committee has a better understanding of your funding sources and expenses:

**Monthly Income**

Item	Amount	Notes
Financial Aid Refund for Current Semester (In total)		
Job 1: _____		
Job 2: _____		
Job 3: _____		
Benefits (Social Security, SNAP, G.I. Bill, TANF, etc.)		
Other: _____		

**Fixed Expenses (per month)**

*Only if you live off-campus should you include rent, utilities etc. The Committee can review on-campus expenses in SPIRE.*

Item	Amount	Notes
Tuition Payment Plan (only if you are paying directly, do not include if someone else is paying tuition for you)		
Rent/Mortgage (off-campus)		
Renter's/Home Insurance		
Car Payment		
Car Insurance		
Childcare		
Loan Payments		
Other: _____		

**Variable Expenses (average per month)**

Item	Amount	Notes
Utilities (Electric, water, gas, etc.)		
Groceries		
Toiletries/Household Items		
Other Needed Household Items		
Medical Bills/Medication		
Other: _____		
Other: _____		

**Other Expenses (average per month)**

Item	Amount	Notes
Internet		
Cable		
Cell Phone		
Subscriptions (Netflix, Spotify, etc.)		
Other: _____		
Other: _____		

6. If approved, this grant could affect awarded Financial Aid or Federal Income Taxes.

*The amount of any grant provided may be considered taxable income and reported on a tax form 1098-T. 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. If awarded, this grant does not require re-payment.*

Initial to agree to these terms: \_\_\_\_\_

I, the undersigned, certify that the information provided on this application is true:

Applicant Name \_\_\_\_\_ (please print/type)

Applicant Signature \_\_\_\_\_ (please sign)      Date \_\_\_\_\_

Completed applications should be submitted to the Dean of Students Main Office in Whitmore 227.  
If you have additional questions, please contact Cara Appel-Silbaugh, Ph.D., Dean of Students at [caras@umass.edu](mailto:caras@umass.edu) or 413-545-2684.

**Dean of Students Main Office Staff, please check the box when the step is complete:**

Log Application in Voice     Upload Application in Box     Add Application to Data Sheet in Box

**Microgrant Committee, please complete the following:**

Financial Aid Information: \_\_\_\_\_

Outstanding University Bills: \_\_\_\_\_

SPIRE Holds: \_\_\_\_\_

Other: \_\_\_\_\_

Approve: \$ \_\_\_\_\_     Deny     Pending

Review Date: \_\_\_\_\_

Notes: