

NEW ENGLAND LAW | BOSTON EMERGENCY FUND APPLICATION

The Law School Emergency Fund is available to provide limited financial assistance to enrolled students who are unable to meet immediate, essential expenses because of temporary hardship caused by the COVID-19 emergency. The priority **deadline** for application submissions is **June 26, 2020**. All applications must be submitted by email to the Office of Financial Aid at finaid@nesl.edu.

ELIGIBILITY REQUIREMENTS

Applicants must be currently enrolled and have temporary financial hardship caused by the COVID-19 emergency. Applicants must also be in good academic standing and maintaining satisfactory academic progress. A holistic evaluation of your application will be conducted.

First Name: _____

Last Name: _____

Student ID: _____

Phone #: _____

Class Year: _____ Program: _____

New England Law E-mail Address: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

of Dependents (other than yourself): _____

EMERGENCY NEED

Please select all that apply. Applicants must demonstrate that the financial need is a one-time, unexpected expense caused by the COVID-19 emergency rather than a chronic financial need.

- Groceries/toiletries
- Emergency healthcare
- Urgent short-term childcare assistance
- Emergency travel or transportation
- WiFi or other technology expense associated with remote learning
- Other:**

Please briefly explain the nature of your emergency including how the emergency was caused by COVID-19. Include how this emergency is impacting your financial well-being and life responsibilities.

What other resources have you sought for financial assistance?

Do you have access to family support or any other sources of financial support?

Is there additional information you would like us to consider when assessing the need caused by the COVID-19 emergency that will assist us in evaluating your situation?

Note: Upon review, additional information may be requested in order to finalize your request.

I certify that under the pains and penalties of perjury, the information provided on this application is true and correct.

Signature: _____

Date: _____