

Student Enabling (Emergency Assistance) Information Sheet

Name: _____ Program of Study: _____

Amount requested: _____

FAMILY BUDGET INFORMATION

Employer:	
Income:	Rent/House Payment:
Spouse Employer:	Car Payment:
Spouse Income:	Utilities:
Other Income:	Other Installments:

Admissions Status:

Regular

Full time

Special

Part time

Number of Quarters Remaining: _____ Current Quarter: _____

SCHEDULE

Course:	Instructor:
Course:	Instructor:
Course:	Instructor:

*****For Student Enabling Applicants Only*****

In order for your student enabling application to be reviewed, the following items must be attached. **Incomplete applications will not be reviewed.**

- Copy of last month's installment payments.
- A detailed essay of your circumstances, why you need the emergency assistance (250 word max.).
- A letter of recommendation from a full-time SWGTC instructor.
- A current copy for your transcript.

Please note that students may receive emergency assistance (the student enabling scholarship) only once.