



DC3 Higher Education Emergency Relief Fund III Application (HEERF III)

The **American Rescue Plan Higher Education Emergency Relief Fund (HEERF III)** has been created to assist students with covering any component of the student's cost of attendance (COA); or emergency costs that arise due to Coronavirus, such as but not limited to tuition, food, housing, health care, mental health care, or child care. DC3 is required to prioritize grants to students demonstrating exceptional financial need.

Student that are eligible:

- Any individual who is or was enrolled at an eligible institution on or after the date the national emergency was declared for COVID-19 – March 13, 2020
 - Refugees, asylum seekers, Deferred Action for Childhood Arrival (DACA) recipients, other DREAMers, and similar undocumented students now qualify
 - Students exclusively enrolled in distance education, non-degree seeking, non-credit, dual enrollment, and continuing education students may receive these funds

Application Process:

HEERF III Student Emergency Grant Applications will be accepted by completing the below portion of this form. Please return the completed Application to DC3's Financial Aid Office by submitting it through <https://liquidfiles.dc3.edu/filedrop/FinancialAid> or you may print the form and drop it off at the Financial Aid Office in the Student Union. Students will be required to apply for these funds each semester.

Student Demographics

Student ID #: _____ First Name: _____ Last Name: _____

Current Phone Number: _____ Email Address: _____

What semester are you applying for these funds for? Summer 2021 Fall 2021 Spring 2022

Please write the requested amounts for each category below:

Need	Requested Amount
Housing	
Tuition/Fees	
Food	
Tech/Materials	
Health Care/Mental Health Care	
Childcare	
Transportation	

Please write why you believe you need these funds:

Authorization*

Please mark one of the following:

(If you do not select one of the following, this application will not be complete and will be returned back to you.**)**

I authorize DC3 to apply any Emergency Grant Aid awarded to my student billing account to resolve any outstanding charges

I do not authorize DC3 to apply any Emergency Grant Aid awarded to my student billing account to resolve any outstanding charges

Certification

By signing this form, I am certifying that I am the named student on the form and I am certifying that the information provided is true and correct to the best of my knowledge.

Student Signature: _____

Date: _____