Modified 22 Aug 2023

OU COLLEGE OF LAW Emergency Relief Fund
Grant Application

Grants may be awarded only for College of Law students facing financial expenses associated with or arising out of an emergency, including but not limited to COVID-19. Recipients will be selected by the OU College of Law Scholarship Committee, which will determine the amount and number of grants based on available funding.

Applicant must a full-time, regularly enrolled student in good standing at the College of Law; must show a demonstrated financial need; and must not be a contributor to the Emergency Relief Fund or an immediate family member of a contributor. Funds may not be requested or used to pay a Bursar balance. Incomplete applications will not be considered.

Legal Name _____ Email address _____

Current Address _____

Cell Phone # _____

How much money are you seeking? _____

Did you apply for CARES Act funding through main campus? ____YES or _____NO
If yes, have you received or been notified that you will receive CARES Act funding? _____YES or _____NO

Please list all sources of income:

- Total Financial Aid received for Fall 2023 & Spring/Summer 2024 _____
- Total Scholarship Awards/Waivers received Fall 2023 & Spring/Summer 2024 _____
- Your working gross income (per month) _____
- Spouse or partner's gross income per month _____
- Monthly child support/alimony/military benefits you receive _____
- CARES Act funds received or to be received _____
- Balance in savings or other accounts to which you have access _____
- Other income or gifts you have received or will receive for the Fall 2023, Spring 2024, and Summer 2024, including funds paid on your behalf or to you by parents, grandparents, other family members, and trusts: _____

Please explain below (use additional sheets if necessary) what has happened that has created a financial emergency, and explain how you would use the grant money (please be specific):

_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____

By my signature below, I certify that the information provided above is true, accurate, and complete.

_____ _____
Student's Signature Date

Approved ____ Disapproved _____ Amount _____ Date Approved ____