

Emergency Funding Application – Current School Fiscal Year

APPLICATION DEADLINES: Fall Semester – December 3; Spring Semester – April 7



Date: _____

Parent(s) Name: _____

Contact information: Phone _____ Email _____

Name of Student: _____ School: _____

..... Only one student per application

PLEASE ONLY CHECK ONE:

- I have applied for financial aid through FAIR, Inc. and have **received CTSO funding**. I have an unforeseen emergency and unmet financial need as determined by FAIR, Inc. and I would like to apply for additional emergency funding. – OR –
- I have applied for financial aid through FAIR, Inc. and **did not received CTSO funding** but I do have an unforeseen emergency and would like to apply for emergency funding. – OR –
- I have not applied for financial aid through FAIR, Inc. but I have had an unforeseen financial emergency that occurred after the current year CTSO FAIR, INC. application deadline. I have attached the required **Income Verification Form**. Form may be downloaded from www.ctso-tucson.org

Note: Please check reason for emergency funding and provide an explanation on a separate sheet. **You must submit a separate statement of need and check reason below.** Please notify your school's scholarship manager or principal of your Emergency Funding application.

Check reason: death loss of employment divorce illness other

— FOR CTSO USE ONLY —	
CTSO Funding \$ _____	Other STO Funding \$ _____
ITC 2 _____	CTC _____
ITC _____	Tuition balance _____
FAIR Family ID _____	Student ID: _____
Emergency Funds Approved \$ _____	
Approved by the Scholarship and Allocation Committee: _____	

DO NOT FAX

Please send completed applications by mail or scan and email to:
Erica Otero CTSO, PO BOX 31, Tucson, AZ 85702; Email: eotero@diocesetucson.org

DO NOT FAX