

**College of Health Professions
Medical University of South Carolina**

Emergency Financial Support Stipend for Enrolled Students

Purpose:

The purpose of the CHP Emergency Financial Support Stipend is to provide one-time emergency financial assistance to enrolled students in financial distress. The funds are intended to provide immediate financial assistance to eligible and qualified students so that they may continue in their program of study. (See eligibility requirements below). Please note that applications are accepted throughout the year pending availability of funding. Awards are limited to a maximum of \$500. Funds may be applied towards tuition or personal living expenses while enrolled.

Eligibility:

To be eligible for a one-time emergency stipend, the CHP student must:

1. Complete the attached application indicating the stated reason for the financial assistance request. Student is responsible for obtaining Division Director's signature and requesting budget adjustment from the Financial Aid Office.
2. Be currently enrolled in CHP program and in good academic and professional standing (as verified by the division director).
3. Not be eligible for additional financial aid (as verified by the MUSC Financial Aid Office).
4. Not have received a previous CHP Emergency Financial Support Stipend.

Application Process:

Students interested in applying for emergency financial support stipend must complete the attached application form and submit it to Dr. Karen Wager, Associate Dean for Student Affairs, College of Health Professions. It may be sent electronically to wagerka@musc.edu.

Approved May 1, 2020

Updated June 2, 2020



College of Health Professions
Emergency Financial Support Stipend

Date of Application: MUSC ID (900*****):

First Name: Last Name:

Program:

Address:

City/State/Zip:

Phone: MUSC Email:

Amount Being Requested (not to exceed \$500):

Amount of Funding Received from Other Sources (if applicable):

Academic and Professional Standing Verification (to be completed and signed by Division Director):

Student is in good academic standing. Yes No
Student is in good professional standing. Yes No

Signature of Division Director

Financial Aid Verification (to be completed and signed by Financial Aid Staff):

The applicant requested a budget adjustment and the following was determined:

- Student qualified for a budget adjustment and accepted available aid.
- Student qualified for a budget adjustment and **declined** available aid.
- Student **did not qualify** for a budget adjustment.

Signature of Financial Aid Staff

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Reason for Requesting Assistance (can be attached in a separate document):

**Attach any supporting documents separately*

Office Use Only - Dean's Approval

Approved Amount:

Signature:

Signature of College of Health Professions Dean

Date: