



COVID-19 Relief Grant Application

In order to address the needs of currently enrolled students who have experienced financial difficulty as a direct result of the COVID-19 pandemic, the Geisel School of Medicine has created a relief fund to provide grants when other sources of aid, including loans, have been exhausted. Students who have borrowed up to full cost of attendance and need financial assistance as a result of the COVID-19 pandemic are eligible to apply for this grant. ***Please note that the maximum grant that can be made from this fund is \$1,000.***

Name: _____ Net ID: _____

Amount Requested: _____

Please identify the changes in your personal financial circumstances that have arisen during the pandemic and how they have impacted your living expense budget.

Please also list the expense(s) you have incurred and attach via pdf or jpg any receipts and/or other documentation to support your request. The Office of Financial Aid may ask you to supply additional documentation associated with the costs you have identified.

COVID-19 Relief Fund requests will be reviewed by a committee and you will be informed of their decision within 2-3 business days via email. Should your request be approved, funds will be credited to your student account for you to request as a refund.

If you have any questions before you submit your application, please contact the Office of Financial Aid at Geisel.Financial.Aid@Dartmouth.edu

**By signing this form, you are verifying that the information you have submitted is accurate. Once signed please return along with any supporting documentation to the financial aid office via the email above.*

Signature: _____ Date: _____