Please fill out the form below

Student ID: 
First Name: 
Last Name: 
UTRGV Email: 

Due to coronavirus (COVID-19), I am facing financial challenges that are impacting my ability to continue my education. I would like assistance for (select all that may apply):

- [ ] Education related expenses
- [ ] Housing
- [ ] Food
- [ ] Technology
- [ ] Health Care
- [ ] Child Care
- [ ] Utilities

Application of Student Emergency Fund Payment:
If you currently have a student account balance with UTRGV for the Fall 2021 semester, please indicate your preference below:

- [ ] Yes, I give UTRGV authorization to apply the funds awarded to me under the Coronavirus Response and Relief Supplemental Appropriations Act of 2021 (CRRSAA) or the American Rescue Plan (ARP) towards any outstanding balance in my UTRGV student account. Any funds remaining after my balance has been paid in full, will be disbursed directly to me. I understand that choosing this option is not a requirement to accept and receive this award.
- [ ] No, I do not authorize UTRGV to apply funds towards my student account as I either do not owe a balance or I need these funds for other educational costs. I understand these funds will be disbursed directly to me.

I certify that I am the person identified by the username and password used to access this form, and that I have not disclosed the username and password to anyone else. I understand and agree that any misrepresentation, omission, or falsification of information provided may constitute grounds for disciplinary action under UTRGV Handbook of Operating Procedures Policy STU 02-100 Student Conduct and Discipline, and that UTRGV may also require repayment of funds awarded.