

1. An acknowledgement that **Hair Professionals Career College Sycamore** signed and returned to the Department the Certification and Agreement and the assurance that the institution has used, or intends to use, no less than 50 percent of the funds received under Section 18004(a)(1) of the CARES Act to provide Emergency Financial Aid Grants to Students.
2. The total amount of funds that the institution will receive or has received from the Department pursuant to the institution's Certification and Agreement for Emergency Financial Aid Grants to Students: **\$20,748**
3. The total amount of Emergency Financial Aid Grants distributed to students under Section 18004(a)(1) of the CARES Act as of the date of submission (i.e., as of the initial report and every calendar quarter thereafter): **\$20,748**
4. The estimated total number of students at the institution eligible to participate in programs under Section 484 in Title IV of the Higher Education Act of 1965 and thus eligible to receive Emergency Financial Aid Grants to Students under Section 18004(a)(1) of the CARES Act.[1]: **32 students**
5. The total number of students who have received an Emergency Financial Aid Grant to students under Section 18004(a)(1) of the CARES Act: **32 students**
6. The method(s) used by the institution to determine which students receive Emergency Financial Aid Grants and how much they would receive under Section 18004(a)(1) of the CARES Act. **Equal distributions for all students that signed and returned the acknowledgement statement and were eligible for funds under direction of the US Department of Education**
7. Any instructions, directions, or guidance provided by the institution to students concerning the Emergency Financial Aid Grants.
<https://hairpros.edu/wp-content/uploads/2020/06/Oswego-Hair-Professionals-School-of-Cosmetology-Plan-for-Higher-Education-Fund-FINAL-06-04-20WZ.pdf>

Emergency Financial Aid Grant Application

Under the Coronavirus Aid, Relief, and Economic Security (“CARES”) Act the U.S. Department of Education has made emergency financial aid grant funds available to students of our institution who are in need of financial support for their expenses related to the disruption of campus operations due to Coronavirus. This application permits students to apply for these need-based grants. The School’s administration will use the information you provide here to determine your eligibility for a grant and the amount for which you will be eligible. Each student will be eligible for only one grant, and only one application will be considered per student. Not every student who applies will necessarily receive an emergency need-based grant.

Please fill out this information neatly and completely and provide it within 14 days of receipt. Only currently attending students who are participating in courses actively and making Satisfactory Progress will be eligible to receive a grant. All grant funds, if awarded, will be mailed to the student at the address listed below:

Student Name:

Email

Current Address:

Phone Number:

Have you incurred expenses due to disruptions caused by the Coronavirus Pandemic?

Yes No

If Yes, please provide a paragraph explaining what type of disruption to include the following: Please provide as much documentation as possible including the date, type of disruption, how it impacted your financially, and any backup documentation to support this. You may use additional paper to support your application.

Check all situations that apply to you.

- I am financially responsible for my food expenses
- I am financially responsible for my housing expenses
- I am financially responsible for expenses related to my course materials to attend school
- I am financially responsible for paying for technologies associated with attending online classes
- I am financially responsible for my own health care costs
- I have children and am financially responsible for childcare expenses

I attest that all information is true and accurate, and I am requesting a one-time emergency need-based financial aid grant to help cover the cost of expenses incurred due to the Coronavirus pandemic. I understand that I will be unable to revise this request after submitting it. I understand that the School's determination of my eligibility for and the amount of any grant monies will be based on my responses to the questions above as well as information already on record with the School, including but not limited to my dependency status, family size, expected family contribution, unmet financial need, program length, satisfactory academic progress, and expected completion date.

Signature _____ Date _____

Submit your completed application with supporting documentation within 14 days of receipt to the following staff at your campus:

Palos Hills students	Brianna Dargert
Sycamore students	Crystal Zavala
Oswego students	Megan Dodia

For Administration Use Only Below this Line

Administrator Name: _____

Administrator Position: _____

Student Eligibility Amount: _____