

Edmonds Community College
Veterans Resource Center
Application for Gap Funding Assistance

Who may qualify?

- Student veterans receiving educational benefits who are without funding during a school break, or who are waiting on approval/certification of educational benefits after the quarter has begun, AND,
- Student veterans who are currently enrolled, and if during a school break, are also enrolled for the upcoming quarter, AND
- Student veterans who are in good academic standing, and are making Satisfactory Academic Progress.

What are the funds intended to cover?

- Housing
- Food
- Utilities
- Transportation (bus pass or gas)
- Childcare Copays (limited to \$75)
- In limited cases - Books

What are the fund limits?

- Awards may be given for up to \$200 per week.
- Applications are accepted for up to four events within the academic school year (July 1 – June 30) for as long as funds remain available.

Instructions:

- Complete the information below and on the back of this form.
- Attach a brief letter describing your need.
- Submit your information to the Director of the Veterans Resource Center.

The Veterans Resource Center Committee will review your information and notify you upon approval or denial of your application, typically 1-2 weeks after the end of the quarter. Gap Funds cannot be awarded until grades are released and satisfactory academic progress is verified by school officials. Funds are disbursed through the financial aid system and sent to BankMobile Disbursements to disburse to you according to your refund choice. If you have not received your BankMobile Disbursements refund selection kit or need help setting up your refund choice, please see the VA Certifying Official for more information.

Name _____ Student ID ____ / ____ / _____

List the people in your household, including:

- Yourself, and your spouse if you have one, and
- Your children, if they live with you, and
- Other people if they now live with you and you provide more than half of their support.

If you need more space, attach a separate page

Full Name	Age	Relationship	Full Name	Age	Relationship
Martha Jones (example)	24	Wife			

Monthly Budget Form

Complete the information for your household income and expenses. If married or with a partner, combine your income. Do not include school financial aid funds, or VA educational benefits.

Monthly Take Home Income	
Take home wages and other earnings	\$
Child Support Received	\$
Government Assistance (Unemployment, Social Security, Welfare Benefits, DVR living expenses, L & I, etc.)	\$
Other (please list type)	\$
Total Monthly Income	\$

Monthly Expenses – Excluding Educational Expenses	
Housing (mortgage/rent, utilities)	\$
Food	\$
Transportation (car loan payment, gas, bus pass, etc.)	\$
Medical (counseling services, co-pays, medication)	\$
Child support paid	\$
Other (please list type)	\$
Total Monthly Expenses	\$

I certify that the information I have provided on this application and in my letter is true and correct:

Signature

Date