



CAMP Emergency Housing/Medical Stipend Application

The CAMP Emergency Housing/Medical Stipend is an opportunity for CAMP students to request financial assistance to help with their housing/medical emergency needs. To consider you for an award we assume you have accepted your entire financial aid award offer.

Contact Information

Name _____ Student # _____

Email _____ Phone # _____

Local Address _____ City _____ State _____ Zip _____

Academics

Intended Major/s _____ Minor/s _____

Expected Graduation Date: Quarter _____ Year _____

Financial Aid

Was your financial aid application received on time by the January 15th UW financial aid deadline?

Yes No

Have you accepted the entire amount of your financial aid offer including loans?

Yes No

If you are not on financial aid, how are you funding your cost of education?

Brief Explanation:

Employment

Are you employed while attending the UW? Yes No

If yes, who is your employer _____

Hours worked per week _____ hrs. Hourly Rate \$ _____

Award Letter and Cost of Attendance

Make sure you have attached the following documents when submitting your application. All documents can be found on MyUW. We ask you submit them as a PDF and not a screenshot. When on a webpage you can hit the print button and change the printer to Save As PDF. This can look slightly different depending on your browser and operating system. Please reach out if you need assistance.

- Award Letter
- Cost of Attendance (Found on MyUW Financial Aid Status)
- Tuition Statement Page
- HFS Statement of Account if living on-campus
- Monthly rent amount if living off-campus \$ _____

Dollar Amount Requested

Amount requesting \$ _____

Quarter and year needed _____

In the space provide below, briefly explain your request. Explain why you need the amount requested and how you plan on using it.

Student Signature _____ Date _____

****Application will not be considered complete until it is filled out and all required documents have been submitted.***