



**Bulldog Relief Fund Application  
Student Veteran Emergency Fund**

**Purpose:**

Funds have been donated by friends of Ferris State University in order to establish an emergency fund for Student Veterans. Grants may be provided to meet non-recurring emergency needs that would otherwise prevent students from continuing their education at Ferris State University.

**Conditions:**

1. Student Veteran must demonstrate that emergency support is directly tied to their ability to remain in school.
2. These funds will cover emergency needs and not be made available to maintain ongoing needs (rent, medication, car payments, etc.) or expenses beyond one-time emergencies.
3. Students will submit an application and supporting documents (invoices, quotes, etc.). Payments will be in the form of a direct deposit to the student upon approval.
4. Funds will not be made available to pay for tuition.
5. Funds will not be made available to cover past-due balances at the University.

**Eligibility:**

I am currently enrolled as a student at Ferris State University:    Yes\_\_\_ No\_\_\_

Have you requested and/or received the Bulldog Relief Fund in the past 12 months?

Yes\_\_\_ No\_\_\_

If yes, please explain the circumstances of the previous request:

If you are currently a FSU Student Veteran, you may be eligible to apply. Follow the instructions below. Please note that applying for support does not guarantee funds will be awarded.

**Application Process:**

A Student Veteran must be referred by the Veteran Resource Center or other appropriate staff member. The student must complete the application and submit it to the Veterans Office for approval. Proof of financial hardship may be required.

**Instructions:**

1. Fill out the Student information.
2. Attach copies of supporting documents (eviction notice, utility shut-off notice, car repair quote, etc.)
3. Submit application to Veterans Office.
4. Veterans Office will review the application and contact the student.

**Student Information:**

Name: \_\_\_\_\_ Student ID #: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Number of Dependents and Ages: \_\_\_\_\_

Marital Status: \_\_\_\_\_

Currently Enrollment Status: Part Time \_\_\_\_\_ Full Time \_\_\_\_\_ Major: \_\_\_\_\_

Requested Amount: \_\_\_\_\_ (not to exceed \$500) Purpose: \_\_\_\_\_

Please explain the circumstances:

Are you employed: Yes \_\_\_\_\_ No \_\_\_\_\_ Full Time \_\_\_\_\_ Part Time \_\_\_\_\_

Name of Employer: \_\_\_\_\_ Position: \_\_\_\_\_

FSU Staff may leave a message about my request on my voicemail: Yes \_\_\_\_\_ No \_\_\_\_\_

