**Community Dreamer Emergency Fund Application for Undocumented Students**

**\*To apply, please email this to** [**sojournmennonite@gmail.com**](mailto:sojournmennonite@gmail.com)

Name­:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Cell:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Top Priorities for Fund Distribution and Documentation Required:

1) unexpected health expenses (please include medical bill or quote)

2) rent (please include bill and number of roommates)

3) groceries (please include the total amount of grocery money needed)

4) other legal or emergency expenses (funded at board’s discretion—please include bill)

\*\*\*\*\*PLEASE **remove all personal information on bill or quote** EXCEPT name\*\*\*\*\*

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Please select the name of the institution you currently attend:

\_\_Colorado State University \_\_high school in Poudre School District

\_\_Front Range Community College, Larimer \_\_high school in Thompson Valley School District

Fund recipients will be **required to show proof of student enrollment** when they pick up their check. Distribution of funds may take up to 1 week. Though we make every effort to accommodate your full request, approval of funds will depend on the number of requests we receive and the amount of money in the account.

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Please describe the emergency situation for which you need funds, the specific purpose(s) for which the funds will be used, and the amount needed for each item:

Please Indicate the Total Amount You Are Requesting (USD):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\* By signing this, I affirm that I am an undocumented student and that all information on this application is accurate to the best of my knowledge. Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Aplicación del Fondo DREAMER de la Comunidad**

\*Enviar esto por correa electrónico a [sojournmennonite@gmail.com](mailto:sojournmennonite@gmail.com)

Nombre:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Celular:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Los que reciban fondos deberán demostrar su estatus de estudiante por medio de una identificatión de su escuela Aunque hacemos todo lo possible por dar la cantidad completa, no se garantiza, ya que todo depende del número de aplicaciones que recibamos y cuanto dinero tenemos en nuestra cuenta. La distribución de fondos pueda tardar hasta una semana, favor de tomar esto en cuenta cuando apliquen.

Seleccione la institutionción o distrito escolar al cual pertenecen:

\_\_Colorado State University \_\_preparatoria en el distrito escolar de Poudre

\_\_Front Range Community College, Larimer \_\_ preparatoria en el distrito escolar de Thompson Valley

Por favor, describa los propósitos específicos para los cuales está solicitando fondos y la cantidad necesaria para cada artículo.

Indique el monto total que solicita (USD):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Firma: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Fecha:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_