## **Emergency Assistance Fund Application**

Revised 08/2023

Section A – Eligible Applicant Information

Persons eligible for financial assistance shall be: (a) active, permanent employees of the University of Nebraska—either faculty or staff—who are classified as regular full-time or regular part-time; or (b) currently enrolled students. Check your applicant type:

- Employee
- Student

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Eligible Applicant's Name

Eligible Applicant's Street Address	
City, State, Zip Code	
City/Town/V we	'
above	
Eligible Applicant's Phone Number	
Eligible Applicant's Email Address	
NUID	

Section B - Determination of Net Eligible Loss

Applicants applying for assistance from the Fund must have a documented hardship, event, or emergency situat (nt)-1nC8 (y)-75gtgygoratt muy

## STEP 1 – Estimated Eligible Loss

Please provide a detailed list of Eligible Losses and the dollar value of each loss. If a comprehensive report of loss is already available from an insurance carrier or government agency, indicate "See Attached" in the first column, provide the total dollar value of loss in the third column, and attach the comprehensive report of loss to this application. If a comprehensive report of loss is not available from an snE2.2-0snEsnEsnE r.1-12 -538.6.1188.04 2.1602.160sn1Esn1Esn1E72E72E

 $\frac{\text{STEP 3} - \text{Net Eligible Loss}}{\text{Complete this worksheet to calculate Net Eligible Loss}}.$ 

A Estimated Eligible Loss (Total from STEP 1 above)

\$


## Section C - Notices

- x This application is a request for assistance and does not obligate the NU Emergency Assistance Fund Committee to award any funds.
- x The NU Emergency Assistance Fund Committee shall provide assistance based on an objective review of the applicant's need or distress caused by the qualifying event or emergency.
- x All financial assistance shall be distributed in compliance with the University of Nebraska's nondiscrimination policy.au9 (o)0.6 ( Tw 0 -1-b (c)-8 (e w54 Td ( )Tj EMC /P <</MCID 11 >>BDd (2 (i)3.2 (n c)-8.1