1. The UT Health San Antonio Student Government Association (SGA) has developed an emergency fund, coined the *Stand By You Fund*, for students enrolled in one of the five schools within UT Health San Antonio. Students facing a financial emergency due to unforeseen or unplanned situations can be provided assistance for up to $500. All applications will be reviewed on a case by case basis. Due to the limited amount of funds available, this resource should only serve as a last resort for individuals. Before submitting an application, students are required to discuss their financial options with their respective schools and the Office of Veteran Services and Financial Aid (210) 567-2635.

2. If you have questions about the emergency fund criteria and conditions, please contact the Office of Student Life’s Senior Program Coordinator, Ellyse Sanchez, or send an email to SGA@uthscsa.edu.

3. Please complete the application below and submit electronically to SGA@uthscsa.edu. Be sure to include all requested items.

4. Students must fully complete the application and provide all requested documentation in order to be considered for funds. Criteria for a completed application are below. Upon approval by the SGA Executive board and Emergency Fund student panel, applicants must go in person with their UTHSCSA ID to the Bursar’s Office to receive the approved emergency funds.

**Conditions and Mission of Fund**

The purpose of the Stand By You fund is to provide interim funding to students, supporting continued participation in UTHSCSA educational programs. The funds will be made only for educational necessities such as tuition, fees, room and board (housing), academic supplies, etc. Emergency funds may only be awarded to a student one time during their enrollment at UT Health San Antonio. Applications for the fund will be reviewed via a case by case basis.

**The Stand By You fund cannot be used to cover any of the following expenses:**

- Parking tickets and other university-imposed fines
- Application or test fees
- Household costs not related to damage or theft
- Costs for entertainment, recreation, non-emergency travel (e.g. attending a conference, study abroad) or other non-essential expenses
- Medical expenses needed for a family member or friend of the student requesting services

**Amount**

Funds are limited to up to $500 and will be granted for appropriate term expenses.

**Disclaimer**

Completion of an application for designated funds from the Stand By You fund does not guarantee applicants will receive funding approval. Applications will be kept confidential.

**Review Process**
If selected for an interview, the applicant will be asked to appear before a panel composed of three faculty or staff with oversight from the Office of Student Life. This process is confidential for both the applicant and the panel. Applications will be de-identified prior to the interview process to reduce potential conflicts of interests and/or bias.

**Awarding Process**

If approved for funding by the SGA and faculty panel, the recipient is requested to submit a synopsis (written and de-identified) to supply examples describing how the fund assisted them within 3 months of being awarded the funds.

**Checklist:**

- € Completed and signed emergency fund application
- € Submission of supporting documentation to date such as photos, itemized receipts, bills, insurance claims, or any other documentation that verifies the emergency**
- **Other schools using these standard operating procedures are as followed: University of Texas Rio Grande Valley, UT Austin, Texas State University, UT Texas-Arlington, College of the Mainland, UT Health San Antonio School of Nursing**
  - o Applicants can provide continued receipts, bills, supporting documentation as necessary after being awarded for proper documentation and awarding purposes.
- € Verification to show good academic standing in 2 ways.
  - o If a student is in their first semester at UTHSCSA, they may submit grades from their previous institution to display good academic standing.
  - o If you are further along as a student at UTHSCSA, please acquire a signature from the registrar’s office as verification for good academic standing.
- € Submission of a written statement of your goals at the UT Health Science Center, the situation leading to this application, and how the funds will help you if awarded (single page, single spaced, normal margins, 12 pt font Times New Roman).
STUDENT EMERGENCY FUND APPLICATION
UT Health San Antonio
Student Government Association

Full Name: ____________________________ HSC ID: ____________________________

HSC Email: ____________________________@livemail.uthscsa.edu Cell Phone: ____________________________

Current Semester: ____________________________ Are you currently working? Yes □ No

If yes, how many hours per week? ____________________________

Reason for Emergency Fund Request (Brief 1-2 sentences):

Attached Documentation to Support Request:

Amount Requested: ____________________________

I verify that the above stated information is true and accurate. I also understand that by submitting this application for emergency funding, my request for funding is not guaranteed to receive approval.

Signature: ____________________________ Date: ____________________________

Printed Name: ____________________________

Authorized Payment Amount: $ ____________________________

Approved: ____________________________ Date: ____________________________

Ellyse Sanchez, Sr. Program Coordinator

Version: March 2021
Emergency Funding Rubric and Decision Sheet

When considering the student’s request, please consider the following items:

- Is the nature of the emergency so detrimental that it will likely cause the student to take a leave of absence regardless of the funding?
- Is the extenuating circumstance surrounding the emergency commonly faced by most students or is this an isolated occurrence that is not likely to occur?
- Has the student submitted sufficient evidence to demonstrate the need?

Committee on Faculty and Student Matters Recommendation:

- Recommend funding at the requested amount.
- Recommend funding at a different amount: $_______________
- Do not recommend funding.
- Recommend student receive counseling for a Leave of Absence by the appropriate Associate Dean.

Date decision was made by SGA and faculty panel: _______________________________

_______________________________

_______________________________

_______________________________

_______________________________

Signature of current SGA Treasurer and President and date signed: _____________________

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