



North Idaho College

1000 West Garden Avenue, Coeur d'Alene, Idaho 83814
www.nic.edu

Center for New Directions: 2022-23 CARES Relief Application

If you have been impacted by the COVID-19 pandemic and are seeking some additional monetary support, please complete the application below. All applications will be evaluated on a case-by-case basis and are not a guarantee of an award. Incomplete applications will not be processed. All applications must be submitted to the NIC main campus by a Center for New Directions Employee directly.

APPLICATION STEPS:

1. Complete all required sections of this application
2. Indicate if each statement applies to you on page 2 and provide all required documentation based on answers
3. Submit your completed application to the Center for New Directions
4. The Center for New Directions will submit the form to the North Idaho College Financial Aid Office on your behalf
5. Complete the Center for New Directions Scholarship Application

Name: _____
(First) (Middle Initial) (Last)

Any Former Names: _____

Date of Birth (MMDDYY): _____ Last six digits of SSN: XXX - _____ - _____

Email: _____ Phone Number: _____

Address: _____

OFFICIAL FINANCIAL AID OFFICE USE ONLY:

Application Committee Members: _____

Application Decision: Approved Denied

GL Code: _____ Award Amount: _____



APPLICATION STATEMENTS:

Indicate yes or no to the following statements. If you answer yes, include all listed required documentation:

- No Yes 1. I experienced an increase in childcare.
 If yes, provide a bill, contract, invoice, copy of payments to a nanny/babysitter, etc.
- No Yes 2. I experienced the need to purchase a new computer.
 If yes, provide a receipt, invoice, or estimate/listing/advertisement of the computer cost. *May only cover a portion of the total cost depending on price.
- No Yes 4. I experienced unreliable transportation.
 If yes, provide an explanation of your expense and a copy of a bill, invoice, or receipts for car repairs and/or transportation through Uber, Lyft, taxi service, etc. *May only cover a portion of the total cost depending on price
- No Yes 5. I need assistance paying my tuition.
 If yes, provide a statement of charges.
 Please provide a brief explanation
- No Yes 5. I have experienced difficulty paying rent.
 If yes, provide a statement of documentation.
 Please provide a brief explanation
- No Yes 5. I have experienced financial difficulty in another area.
 If yes, provide documentation.
 Please provide a brief explanation

STUDENT INITIAL AND SIGN THIS APPLICATION

- _____ I understand that by submitting this application I am not guaranteed an award.
- _____ I certify that the information and documentation provided on this application is true and accurate.
- _____ I understand that all documentation is required and incomplete applications will not be processed.
- _____ I understand that this application will be evaluated and I will receive notification within 10 business days of submission.
- _____ I understand that the North Idaho College Financial Aid Office may reach out to me through the contact information listed on this form to provide additional documentation required for review of this application.

By signing this document, I give permission to the NIC Financial Aid Office to contact me at the email address and phone number provided. This information may also be shared with the NIC Center for New Directions staff as necessary. I understand this information may include personal and financial information regarding this application.

Student Signature: _____ **Date:** _____

CENTER FOR NEW DIRECTIONS CERTIFICATION

Employee Printed Name: _____

Position: _____ Phone Number: _____

Dates Enrolled: _____

Balance Owed: _____

Scholarship Application Completed: Yes No

If yes, please attach and return with this application to fao@nic.edu

Employee Signature: _____ **Date:** _____

Center for New Directions
Louisa Rogers
208-769-3447
Louisa.rogers@nic.edu

