

## 2021-2022 Faculty Student Association Emergency Cash Advance

Name:	Student ID Number:		
Program:	Class Year:	Phone #:	<del></del>
Loan Amount Requested: \$			
Purpose for which the loan is b	eing requested:		
Have you completed and subm	itted the financial aid materials	s/applications for the period for which yo	ou
are requesting the loan? $\Box$	Summer 2021	21 Spring 2022	
Do you currently have an outst	anding FSA loan? 🔲 Yes	□ No	
If yes, indicate the amount outs	tanding: \$		
amount borrowed, including the fail to make payment on this no principal borrowed. I recognize from SUNY Downstate. I unde I hereby authorize the Bursar's to me from the Faculty Student funds, which are due from the I AMOUNT OF THE DIRECT LO	e processing fees, to the Faculite when due, I will pay all collect that this emergency loan beconstand that a hold will be place. Office of SUNY Downstate Me. Association Emergency Cash Financial Aid Office for the currowan I AM REQUESTING AND that amount. My signature certi	promise to pay back the total ty Student Association. I understand the ection costs as well as the loan fees and omes due immediately upon my withdrawd on my records should I not repay the edical Center to deduct any funds advantaged to the edical Center of the edical Center to deduct any funds advantaged to the edical Center to deduct any funds advantaged to the edical Center to deduct any funds advantaged to the edical Center to deduct any funds advantaged to the edical Center to deduct any funds advantaged to the edical Center to deduct any funds advantaged to the edical Center to deduct any funds and edical Center to deduct any funds advantaged to the edical Center to deduct any funds advantaged to the edical Center to deduct any funds advantaged to the edical Center to deduct any funds advantaged to the edical Center to deduct any funds advantaged to the edical Center to deduct any funds advantaged to the edical Center to deduct any funds advantaged to the edical Center to deduct any funds advantaged to the edical Center to deduct any funds advantaged to the edical Center to deduct any funds advantaged to the edical Center to deduct any funds advantaged to the edical Center to deduct any funds advantaged to the edical Center to deduct any funds advantaged to the edical Center to the ed	d awal loan. nced aid <b>ΓΗΕ</b>
Signature: Please r	ote the processing fee for all e	Date: emergency advances if \$1 per \$50 borro	owed.
Emergency Cash Advance Policy and Procedures are attached to this application			
FINANCIAL AID OFFICE USE ONLY			
Approved Decline	d Amount:	Date:	

Office of Student Financial Aid 450 Clarkson Avenue Box 110 Brooklyn, NY 11203-2098 Phone: (718) 270-2488 Fax: (718) 270-7592

Financialaid@downstate.edu



## **BORROWER COPY**

## Faculty Student Association Emergency Cash Advance Policy and Procedures

Emergency Cash Advance are only available to students who have applied for and have been awarded financial aid through SUNY Downstate. This application is a written request for funds to use in emergency situations. You are expected to budget your student aid funds so that these requests might be used minimally. The following process is required.

- 1. All Emergency Cash Advance must be requested through the Office of Financial Aid. Student aid must be available to cover the request.
- 2. Only students who have submitted all of their financial aid documentation (FAFSA to the federal government and any required documentation such as tax forms) are eligible for an Emergency Cash Advance. You must have enough financial aid to cover the amount of any charges outstanding in the Bursar's Office and the amount of the Emergency Cash Advance.
- 3. You must be registered for at least half time per program requirements and accept your Student Account charges for the semester in which you are applying for an Emergency Cash Advance.
- 4. You may borrow no more than \$2000 per academic year, and can have no more than \$1,000 outstanding as an Emergency Cash Advance balance due at any time, unless special permission has been obtained through the Financial Aid Director, the Bursar and the FSA Office.
- 5. Emergency Cash Advance are not available during time periods outside of the normal semester calendar for the student's curriculum. You may not apply for an Emergency Cash Advance any earlier than the week prior to the first day of classes for any semester for which you desire the loan.
- 6. Emergency Cash Advance applications are initiated in the Office of Financial Aid. Completed applications must be received the Office of Financial Aid by Tuesday for monies to be picked up the following Friday. Any applications received after Tuesday will be processed on the following week. This schedule may be adjusted when holidays or other changes in the normal schedule occur within the week.
- 7. There is a \$1 processing charge per \$50 of the amount borrowed. The processing fee will not be waived, regardless of the conditions causing the need for the Emergency Cash Advance. Since this funding is provided by the FSA, which is a private foundation and not part of the State University of New York system, the fee is not negotiable.

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