

AMUSE

MEMBER HARDSHIP FUND APPLICATION

*Please complete in full. Use additional paper if required.
All information provided will be treated confidentially.*

CONTACT INFORMATION

DATE	
FULL NAME	
MCGILL ID	
ADDRESS – MAILING	
ADDRESS – PERMANENT	
PHONE NUMBER – PRIMARY	
PHONE NUMBER – SECONDARY (optional)	
EMAIL ADDRESS	

DECLARATION OF HOUSEHOLD INCOME AND EXPENSES

Monthly Income

Position at McGill (optional): _____

SOURCE	Amount Received Under Regular Circumstances	Current Amount Received After Exceptional Circumstances* (if applicable)
SELF		
SPOUSE OR PARTNER		
OTHER SOURCE OF INCOME (please specify)		
TOTAL		

*e.g. job loss, reduced hours, etc. (please explain in "Nature of Hardship" below).

Expenses

Please note, proof of expenses may be requested, i.e. mortgage agreement, rental agreement, bills, tuition, loans, etc.

Expense Type (e.g. rent, groceries, etc.)	Monthly Amount
TOTAL	

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Nature of Hardship

Please explain your extenuating circumstances.

Is your request pressing (must it be heard before the next scheduled Board of Representatives meeting)?

YES

NO

Absent hardship funding, how will you address your circumstances? i.e. Have you applied for assistance elsewhere?

Please specify in what format you are able to accept funding:

Loan

Bursary

Regardless of the Board's decision, what non-financial support can AMUSE provide for you at this time?

