



## Angel Fund Program

### **Purpose:**

The purpose of the Angel Fund Program is to assist CCCC tribal college students with emergency financial assistance for an unforeseen financial emergency that, if not resolved quickly, could lead to the student's departure from college and a loss of momentum toward completion.

Eligible expenses may include but not limited to: housing/rent, child care, transportation, utilities, healthcare expenses, or any other unexpected emergency expense.

### **Eligibility:**

To be eligible for the Angel Fund Program a student must meet the following criteria:

- Enrolled as a regular college student (excluding High School/Dual Credit/Early Entry Students)
- CCCC employees are not eligible to apply
- Enrolled in a minimum of 6 credits during the academic term in which the Angel Fund is awarded
- Must meet CCCC Satisfactory Academic Progress as of the date of application
- \$500 maximum award per academic year (dependent on availability of funding)
- Students must submit copies of past due billing only, receipts, invoices, or other statements to document the request for assistance.
- Car Repair requests must include an estimate and a copy of title/registration in student's name.
- Assistance with utility bills must be in student's name or student must provide supporting documentation. (Rental Lease)
- Deadline to submit Angel Fund requests is two weeks into the semester and up to one week prior to the last day of the semester as stated on the academic calendar.

Students must complete the Angel Fund application and provide a personal statement on how they plan to use the emergency financial assistance and how the "Angel Fund" will help them to achieve their academic goals. The CCCC Financial Aid Committee will review each student request for Angel Fund assistance. Requests must be approved by a quorum of 3 of 5 voting members of the Financial Aid Committee.

The Financial Aid Director will notify students by email with the committee's final decision. The Financial Aid Director will also maintain and monitor a list of student recipients to ensure compliance with the maximum award amount and for reporting purposes. Financial support is dependent on availability of funds. CCCC reserves the right to adjust this policy as needed.



CANKDESKA CIKANA  
COMMUNITY COLLEGE  
*Spirit Lake Tribe*

## Angel Fund Application

Name: \_\_\_\_\_

Address: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Tribal Affiliation: \_\_\_\_\_

Gender: \_\_\_\_\_

Enrollment Status: \_\_\_\_\_

Program of Study: \_\_\_\_\_

Cumulative Grade Point Average: \_\_\_\_\_

Credits in Current Term: \_\_\_\_\_

### Personal Statement:

- Please tell us why you are requesting Angel Fund emergency assistance. Provide a personal statement on how the assistance will help you to achieve your higher education goals. Personal statements should be no longer than a page.

**Please attach utility bills, estimates, invoices, etc. for the amount that you are requesting from the Angel Fund.**

### Disclosure

I hereby certify that the information provided in this application is, to the best of knowledge, true and correct. In addition, all information obtained from this application may be used by the Cankdeska Cikana Community College for marketing and recruiting purposes.

Signature \_\_\_\_\_

Date \_\_\_\_\_