

Cares Grant Disclosure – Capri Davenport – 8/17/20 update

1. Capri College has signed and returned to the Department the Certification and Agreement and the assurance that the institution has used, or intends to use, no less than 50 percent of the funds received under Section 18004(a)(1) of the CARES Act to provide Emergency Financial Aid Grants to students.
2. Capri College Davenport has received \$111,462 from the Department pursuant to the institution's Certification and Agreement [for] Emergency Financial Aid Grants to Students.
3. As of 8/17/20, \$114,945.18 of Emergency Financial Aid Grants have been distributed to students under Section 18004(a)(1) of the CARES Act. Since the initial report in June, \$3483.18 in additional funds have been issued to students. Since the last update, no additional funds have been drawn.
4. Currently, 99 students at the institution are known to be eligible (have completed a FAFSA) to participate in programs under Section 484 in Title IV of the Higher Education Act of 1965, and thus eligible to receive Emergency Financial Aid Grants to students under Section 18004(a)(1) of the CARES Act.
5. 99 students have received an Emergency Financial Aid Grant to students under Section 18004(a)(1) of the CARES Act.
6. All students who were in attendance as of 3/13, have completed a FAFSA, and indicated a negative effect due to COVID-19, will receive Emergency Financial Aid Grants either by check or ACH direct deposit, under Section 18004(a)(1) of the CARES Act.
7. The following guidance/directions was provided by the institution to eligible (and potentially eligible) students concerning the Emergency Financial Aid Grants.

Capri College

Student Certification Form

Capri College has been notified that we will receive emergency funds from the CARES HEERF fund to help our students negatively affected by COVID-19 and will soon be distributing funds to students. The amount is estimated to be from \$800 to \$1000 per qualified student (this is an estimate ONLY).

Have you been negatively affected by COVID -19? Please check which answer suits your situation?

Yes OR No (Mark an X before your response)

If yes, fill in the information below:

I, (type your first and last name here) _____, certify that I have been affected by COVID-19 and agree to use the funds distributed to me for the following needs: food, housing, course materials, technology, health-care and/or child care expenses as stipulated in the CARES HEERF Policy set forth by the US Department of Education.

These funds will not be retained/used directly for tuition expenses or paying off tuition balance to the school. The funds will be distributed to all students enrolled as of March 13th that have signed/completed this certification.

Reply ASAP with your information. Each line must be completed.

(Type Name Here)

(Street address, include apartment # if applicable)

(City, State, Zip)

(Best phone # (cell))

Student signature _____ Date signed _____

** By Typing your name and emailing this back you are signing this document.

School signature (TO BE COMPLETED AFTER RETURNED)

_____ Date Signed _____

If you would like funds directly deposited into your account, please call Sara Fiegen-Hull in Accounting at 563-588-2379 x 309 and provide the exact name on your bank account, Bank routing number (9 digits), and Bank account number.

THIS FORM MUST BE FILLED OUT AND EMAILED BACK BY 5/8/20 FOR STUDENT TO QUALIFY FOR FUNDS

Your typed name is considered your legal signature if sent from the email address we have on file for you. A paper copy of this agreement will be mailed if requested, or you may print, complete and mail (or email a picture) this document to the school.