





CERTIFICATION	
<p>I certify that the information provided in this application and supporting documents is accurate, my financial hardship is genuine, and that I have not previously been reimbursed for claimed expenses. I understand any money received is a one-time award and may be required to be reported as taxable income. I will apply all money received toward debts related to my temporary emergency. I certify that I have read the SFEF guidelines and understand information from my application and supporting documents will be reviewed by the SFEF Committee for consideration. I understand completion of this application does not guarantee funding and that if needed, I will address any concerns or questions related to my request. Furthermore, I understand that all decisions rendered by the SFEF Committee are final.</p>	
Employee Signature	Date

Submit application and copies of supporting documents to:  
UNIVERSITY PERSONNEL  
[staff-fac-emerg-fund@sjsu.edu](mailto:staff-fac-emerg-fund@sjsu.edu)