The Good Samaritan Grant is a campus resource for Fresno State students experiencing unanticipated financial roadblocks that can impact degree completion and well-being. The Good Samaritan Grant was established through generous contributions from the community and private donors.

The Grant is not a loan and does not need to be repaid.

Essential to the application process

- Currently enrolled at Fresno State and making Satisfactory Academic Progress toward a degree as determined by Financial Aid
- Adhering to University code of conduct
- Demonstrate current financial need with supporting documentation
- Provide a detailed itemized list of how funds will be utilized
- Have exhausted all sources of financial assistance and aid, including Subsidized and Un-Subsidized Loans

Application steps

- Application must be typed and provide a comprehensive description of unanticipated circumstances and financial need.
- Email completed application to goodsamaritan@mail.fresnostate.edu
- Students who apply for Good Samaritan Grant will be referred to the Money Management Center.

Qualifying Examples

- Utilities
- Housing/Rent
- Medical expenses
- Tuition & books
  (In the case of requests for replacement of stolen items, the committee will determine reasonable replacement value for the items.)

Process

Once the application is submitted, you will be contacted by the Project HOPE Graduate Assistant to discuss any modifications to be made to the application. Once application is complete, it will be forwarded to the Good Samaritan Grant decision committee. If funds are awarded, students will receive the funds in about two weeks via their chosen financial aid disbursement method.

Contact Information

Email: goodsamaritan@mail.fresnostate.edu
Phone Number: 559.278.6723 or 559.278.6736
Project HOPE is located in the Student Health and Counseling Center
Good Samaritan Grant Application

Eligibility Verification:

☐ I have exhausted all of my financial aid INCLUDING Direct Subsidized loan.

☐ I am able to demonstrate my current financial need with supporting documentation.

☐ The cause for my current financial need was unforeseen and beyond my control.

Student Information:

Name ___________________________________________ ID # __________________________

Address __________________________________________

City ___________________________ State ___________ Zip Code ______________________

Phone ___________________________ Email ______________________@mail.fresnostate.edu

Do you belong to a special program, such as EOP, Renaissance Scholars, or CAMP?

Circle one:  Yes   No   If yes, which one: __________________________

Referred to Good Samaritan Grant By: _____________________________________________
(Name and Department)

Total Amount Requested: $ ____________

How will you use these funds? (Please attach documentation along with itemized list)

Please answer the following questions on a SEPARATE document and attach them to your application:

1. Briefly describe your unforeseen financial emergency or catastrophic event.
2. How has this situation created a barrier to your academic success?
3. How will these funds alleviate your circumstance?
4. Please describe how you will manage your future financial needs (job, financial aid).

I affirm that all information on this application is complete and true. I authorize Fresno State to release my Project HOPE Grant Application, financial aid information, academic records, to the review committee and the Money Management Center.

Student Signature: ___________________________ Date: ______________________

I affirm that all information on this application is complete and true. I authorize Fresno State to release my Project HOPE Grant Application, financial aid information, academic records, to the review committee and the Money Management Center.