**EMERGENCY ASSISTANCE TO NON-PUBLIC SCHOOLS (EANS) PROGRAM**

**UNMET NEEDS APPLICATION**

**MUST BE SUBMITTED BY APRIL 26, 2022**

|  |  |
| --- | --- |
| Name of School: | |
| School’s BEDS Number: | |
| School’s Institution ID Number: | |
| I certify to the best of my knowledge and belief, all of the information in this application is true and correct. I further understand that knowingly making a false statement or misrepresentation on this application may subject me to criminal or civil penalties under applicable State and Federal laws. Additionally, I certify that my school did not and will not apply for and receive a loan under the Small Business Administration's Paycheck Protection Program (PPP) (15 U.S.C. 636(a)(37)) that is made on or after December 27, 2020. I further certify, to the best of my knowledge, that any ensuing program and activity will be conducted in accordance with all applicable Federal and State laws and regulations, application guidelines and instructions, assurances, certifications, Appendix A, and Appendix A-1G. | |
| Authorized Representative of the School (Typed Name): | Telephone: |
| Signature of Authorized Representative of the School: | Date: |

☐  **My school(s) does not have any remaining unmet needs that we wish to address under EANS I.**

**Reimbursement Requests**

|  |  |
| --- | --- |
| **Expenditure Type** | **Total $ Request** |
| Safety Supplies & Equipment |  |
| Health and Safety of School Facility |  |
| Educational Supports |  |

**Educational Supports (through NYSED EANS contracted vendors)**

|  |  |
| --- | --- |
| **Service Type** | **Total $ Request** |
| Academic Support Services |  |
| Social-Emotional Support Services |  |
| Other Educational Supports |  |

**Ventilation Improvement (through NYSED EANS contracted vendors)**

|  |  |
| --- | --- |
| **Service Type** | **Total $ Request** |
| HVAC Improvement |  |
| Window Improvement |  |