

Finish Line Grant Application

TO BE COMPLETED BY STUDENT

Student Information

Full Name: _____ Today's Date: _____
Last First M.I. MM/DD/YYYY

Student ID #: _____

Address: _____
Street City State Zip code

Phone Number: _____

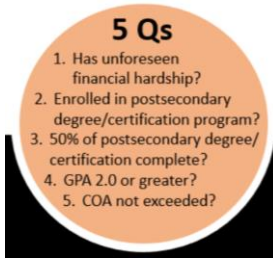
Program of Study/Credential: _____

Is there an immediate, unforeseen financial hardship?	Yes	No
Please describe:		

Attestation and Signature

I certify that my answers are true and complete to the best of my knowledge. I understand that false or misleading information in my application or interview may result in denial/repayment. Any FLG funds received must be used for the intended purpose.

Student Signature: _____ Date: _____



TO BE COMPLETED BY STAFF

Eligibility Question 1: *(If yes, continue to Question 2):*

Does immediate, unforeseen financial hardship meet qualification? List hardships: _____	Yes	No
---	-----	----

Eligibility Question 2 *(If yes, continue to Question 3):*

Is student currently enrolled in an NC community college <u>postsecondary</u> diploma/certification program? Program of Study: _____	Yes	No
--	-----	----

Eligibility Question 3 *(if yes, continue to Question 4):*

Has enrolled student completed at least 50% of diploma/certification, including pre-transfer credits, if applicable, and current semester hours? <i>Attach EVAL</i>	Yes	No
---	-----	----

Eligibility Question 4 *(if yes, continue to Question 5):*

Does enrolled student have a minimum 2.0 cumulative GPA? GPA: _____	Yes	No
---	-----	----

Eligibility Question 5

Describe assistance type and amount(s) needed:	TOTAL	\$
Types & Amounts: _____		
If awarded, has student's Cost of Attendance not been exceeded?	Yes	No

If all eligibility questions answered "**Yes**", student meets Finish Line Grants initial eligibility. If any answered "**No**", please seek assistance from other sources.

STAFF - COMPLETED BY: _____ **DATE:** _____

STAFF - PROCESSED BY: _____ **DATE:** _____

LIST DOCUMENTS ATTACHED: _____
