

North Carolina Community Colleges Golden LEAF Scholars Program – Two-Year Colleges 2024-2025 Student Application

Instructions: Complete this application and return the completed application to the college's Financial Aid Office.

Personal Information:	
Full Name:	Student ID/ Last 4 of SSN:
Home Address:	
City, State, Zip Code:	
Phone Number:	E-Mail Address:
	Length of residence in county (in years):hip, your permanent residence must be in an approved NC county.)
Educational Information:	
Occupational Continuing Educ 96 hours.)	ation Student (must be enrolled in a credentialing program of at least
Program you are enrolled in:	
Your Household Size	\$ Your 2023 Adjusted Gross Income (Or Annual wage)
Curriculum Student:	
Program you are enrolled in	:
Other Information:	
Have members of your immediate far or in the past? yes no	amily worked for or owned a farming or agricultural related business now
Have you or members of your immetextiles, or tobacco manufacturing?	diate family been employed in traditional industries such as furniture, yes no
Has anyone in your household lost t	heir job in the past two years?yesno
Has anyone in your household trans	itioned from a full-time job to a part-time job? yes no
Please list all campus and communi	ty service activities you are currently involved in.
this form is complete and correct to the	rements for assistance. I hereby declare that the information provided on the best of my knowledge. <i>I give my consent</i> to the North Carolina and Golden LEAF to use my name and likeness to promote the Golden on, and/or their activities.
Applicant's Signa	ature — Date