





Finish Line Grant Application TO BE COMPLETED BY STUDENT

	Stu	dent Information			
Full Name:				Today's Date:	
	Last	First	M.I.		MM/DD/YYYY
Student ID #:					
Is there an im	mediate unforeseen financial hardsl	nin in the nast 30-45 days?		Yes	No
Is there an immediate, unforeseen financial hardship in the past 30-45 days? Please describe:				100	140
. 15005 05501					
	Attest	ation and Signature			
	answers are true and complete to the				
in my application or interview may result in denial/repayment. Any FLG funds received must be used for the intended purpose. Student Signature: Date:					
Student Signat	uie. 			Jale	
TO BE COMPL	LETED BY STAFF				
	stion 1: (If yes, continue; if no, stude	ent is not eligible at this time):			
	nediate, unforeseen financial hardship			Yes	No
	·	•			
	stion 2 (If yes, continue; if no, stude rently enrolled in an NC community of		1		
certification p			•	Yes	No
Eligibility Que	stion (If yes, continue; if no, student	is not eligible at this time):			
	I student have a minimum 2.0 cumularming at this level as attested by curr		ı, is	Yes	No
	ssistance (If yes, continue; if no, stu award maximums cannot exceed \$7				
	ear. Is the student still under the ma		<i>7</i> 1	Yes	No
If all eligibility q	uestions answered "Yes", student m	eets Finish Line Grants initial e	eligibility	v. If any answe	red "No", please
	e from other sources.			•	•
Describe assistance type and itemize amount(s) needed: \$1000 total/semester maximum, including conv fees					
				\$	
				\$	
Hannel PC				\$	
Use additional	pages as needed.				
STAFF - COMPLE	ETED BY:			DATE:_	
FA ACKNOWLED	GEMENT:			DATE:	
LIST DOCUMENT	TS ATTACHED:				