



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 #: _____

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

Please describe the need: _____

Amount requested*: _____ *Provide a copy of the bill/invoice

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 Questions:

Does immediate, unforeseen financial hardship meet qualification?	Yes	No
Is student currently enrolled in an NC community college <u>postsecondary</u> diploma/certification program?	Yes	No
Has enrolled student completed at least 50% of diploma/certification, including pre-transfer credits, if applicable, and current semester hours?	Yes	No
Does enrolled student have a minimum 2.0 cumulative GPA?	Yes	No
Describe assistance type and amount(s) needed:	TOTAL	\$
If awarded, has student's Cost of Attendance not been exceeded?	Yes	No

STAFF - COMPLETED BY: _____ DATE: _____

FA ACKNOWLEDGEMENT: _____ DATE: _____

LIST DOCUMENTS ATTACHED: _____