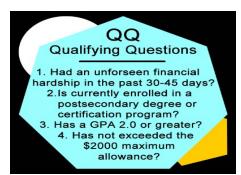


Finish Line Grant Application TO BE COMPLETED BY STUDENT



Stu	ıdent Inform	ation			
Full Name:			Today's Date:		
Last	Fir	st	М.І.		MM/DD/YYYY
Student ID #:					
Is there an immediate, unforeseen financial hards	hip?		Yes	No	
Please describe:					
I certify that my answers are true and complete to the	hest of my kno	wledde Lunder	stand tha	it false or mi	sleadina
information in my application or interview may result in intended purpose.					
Student Signature:				Date:	
TO BE COMPLETED BY STAFF					
Eligibility Question 1: (If yes, continue to Question					
Does immediate, unforeseen financial hardship m	eet qualificatio	1?		Yes	No
Eligibility Question 2 (If yes, continue to Question	3):				
Is student currently enrolled in an NC community of diploma/certification program?	college postsed	condar <u>y</u>		Yes	No
	0				
Eligibility Question 3(if yes, continue to Question	,				
Does enrolled student have a minimum 2.0 cumula GPA?	ative			Yes	No
Eligibility Question 4					
Describe assistance type and amount(s) needed:		•	TOTAL	\$	
If awarded, has student's Cost of Attendance not l	been exceeded	l?		Yes	No
If all eligibility questions answered "Yes", student m seek assistance from other sources.	neets Finish Lin	e Grants initial	eligibility	/. If any ans	wered "No", ple
STAFF - COMPLETED BY:			D <i>i</i>	ATE:	
FA ACKNOWLEDGEMENT:	 		DA	ATE:	<u></u>
LIST DOCUMENTS ATTACHED:					