





Finish Line Grant Application TO BE COMPLETED BY STUDENT

	Student Informat	ion			
Full Name:				Today's Date:	
Last	First		M.I.		MM/DD/YYYY
Student ID #:					
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Is there an immediate, unforeseen financial hardship? Please describe:			Yes	No	
Please describe.					
	Attestation and Sig	nature			
I certify that my answers are true and comp					
in my application or interview may result in o	denial/repayment. Any FLG	funds received m	_	_	intended purpose
tudent Signature:			[Date:	
TO BE COMPLETED BY STAFF					
Eligibility Question 1: (If yes, continue to	o Question 2):				
Does immediate, unforeseen financial ha	ardship meet qualification?			Yes	No
Eligibility Question 2 (If yes, continue to	Question 3):				
Is student currently enrolled in an NC community college postsecondary				Yes	No
diploma/certification program?				100	140
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?				Yes	No
Eligibility Question 4 (if yes, continue to	Question 5):		u.		
Does enrolled student have a minimum 2.0 cumulative GPA?				Yes	No
Filmibility Overalley 5			ı		
Eligibility Question 5 Describe assistance type and amount(s)	needed:	TO	ΓAL	\$	
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If awarded, has student's Cost of Attend	ance not been exceeded?			Yes	No
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If all eligibility questions answered "Yes", seek assistance from other sources.	student meets Finish Line	Grants initial eliç	gibility	. If any answ	/ered "No", pleas
STAFF - COMPLETED BY:			DA	TE:	
FA ACKNOWLEDGEMENT:	LEDGEMENT: D			TE:	
LIST DOCUMENTS ATTACHED:					