



Submit application and all supporting documents to: finaid@cccti.edu

TO BE COMPLETED BY STUDENT

Student ID #: _____ Today's Date: _____
MM/DD/YYYY

Full Name: _____
Last First Middle.

Is there an immediate, unforeseen financial hardship? Yes No

Please describe:

Attestation and Signature

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 Question 1: (If yes, continue to Question 2):

Does immediate, unforeseen financial hardship meet qualification? Yes No

Eligibility Question 2 (If yes, continue to Question 3):

Is student currently enrolled in an NC community college postsecondary diploma/certification program? Yes No

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):

Does enrolled student have a minimum 2.0 cumulative GPA? Yes No

Eligibility Question 5

Describe assistance type and amount(s) needed: TOTAL \$ _____

If awarded, has student's Cost of Attendance been exceeded? Yes No

If all eligibility questions answered "Yes", student meets Finish Line Grants initial eligibility. If any answered "No", please seek assistance from other sources.

STAFF - COMPLETED BY: _____ DATE: _____

FA ACKNOWLEDGEMENT: _____ DATE: _____

LIST DOCUMENTS ATTACHED: _____