

## College and Career Readiness and College Completion Act of 2013 Scholarship

2015-2016 Scholarship Application

Print Name:	Student ID#:
Scholarship Informa This scholarship is Scholarship and tu School students ta	
<ul> <li>Must complete t</li> <li>Must provide yo security card to t</li> <li>Must be a high s students and Free</li> <li>Must meet all of</li> <li>Must demo</li> <li>Must be a</li> <li>Students a</li> <li>Students n</li> <li>a program</li> </ul>	he 2015-2016 FAFSA online at www.fafsa.gov. HCC's school code is 002074. he HCC ESSENCE Program (Early College) Application. ur Social Security Number on the HCC admissions application or provide a copy of your social che Admissions Office in order for the college to receive your FAFSA. chool student during 2015-2016 and also taking at least one course through HCC. Home School see and Reduced Meal Students are not eligible. the following requirements: onstrate financial need — based on the FAFSA part-time student (3-11 credits) only nd their Parents must be residents of the state of Maryland must be degree seeking (the Undeclared Associate's degree is fine if undecided). Please declare of study on Web Advisor or contact the Admissions Office at 240-500-2238 or s@hagerstowncc.edu
<ul> <li>Student Responsibilities</li> <li>➤ I understand I am eligible for the ESSENCE Early College Opportunity Scholarship reducing my tuition charges by completing the HCC ESSENCE Program (Early College) Application.</li> <li>➤ I understand I am responsible for paying any tuition, fee, or book charges not covered by this scholarship.</li> <li>➤ I understand I must submit a new scholarship application each academic year.</li> <li>➤ I understand I must complete all follow up paperwork with the Financial Aid Office.</li> <li>I hereby certify that all information I have submitted is correct and I meet all of the requirements listed in the eligibility section of this application. If granted the scholarship, I agree to the conditions established for this scholarship award. I understand that this scholarship award is contingent upon the completion of the FAFSA and the amount of funding available. <i>Incomplete applications will not be considered for scholarship awards</i>. Please return this application to Kevin Crawford (240)500-2412 in the Admissions Office.</li> </ul>	
Applicant's Signatu	re: Date:
Act Amendments Act (ADA qualified disability, you mu	ollege provides reasonable accommodations to students with disabilities in accordance with the Americans with Disabiliti AA) and the Rehabilitation Act of 1973 and its amendments. If you are an applicant requesting accommodations due to ast call 240-500-2628 to schedule a meeting with Disability Support Services (DSS) staff. Reasonable college iscussed, necessary paperwork will be completed, and appropriate documentation will need to be provided.  UNeed: Residency Major Verification SAP
	Registered credits: Home School FARM Sel Serv

Staff Initial:

Approve/Deny:

Date:

Amount