



Student Financial Aid Office  
11400 Robinwood Drive  
Hagerstown, MD 21742

Phone: 240-500-2473  
finaid@hagerstowncc.edu

**WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.**

## **2026-2027 Edward T. and Mary A. Conroy & Jean B. Cryor Memorial Scholarship Program Application**

**Return both pages and applicable documentation to the HCC Financial Aid Office by July 15, 2026 (by email if submitting on July 15<sup>th</sup>)**

Student Name

Student ID Number

Program of Study

DOB (at least 16 years old)

Are you and if applicable your parents Maryland residents? If not, several exceptions do exist.

How many credits are you planning on enrolling in? (at least 6 credits)

**Please check your eligibility status and** provide documentation with this application such as a birth certificate, marriage certificate, letter from the VA, death certificate, or other paperwork that demonstrates eligibility for the scholarship.

Child or step-child of a member of the US Armed forces who is deceased as a result of military service or who suffered a service connected 100 percent permanent disability as a result of military service after December 7, 1941.

A veteran who suffers a service connected disability of 25 percent or greater as a result of military service and has exhausted or no longer eligible for Federal veterans' educational benefits.

Child, step-child, or surviving spouse of a victim who died as a result of the September 11, 2001 terrorist attacks.

A POW/MIA of the Vietnam Conflict or their child or step-child and was a resident of the state at the time of being declared to be a POW or missing in action.

Child, step-child, or surviving spouse (has not remarried) of a State or local public safety employee or volunteer who died in the line of duty or was 100 percent disabled in the line of duty

A State or local public safety employee or volunteer who became 100 percent disabled in the line of duty

Child, step-child, or surviving spouse (has not remarried) of a school employee who, as a result of an act of violence either died in the line of duty or sustained an injury in the line of duty that rendered the school employee 100 percent disabled

The surviving spouse (has not remarried) of a member of the United States Armed forces who suffered a service-connected 100 percent permanent disability as a result of military service

Check here if you are a **surviving spouse**. The college may need to check on eligibility with the Maryland Higher Education Commission.

A surviving spouse may only be eligible to receive the Conroy/Cryor Scholarship if they meet one of the following COMAR eligibility criteria:

- 13B.08.13.03C (3) (b) - Be either: The surviving spouse of any State or local public safety employee killed in the line of duty
- 13B.08.13.03C (4) (c) - Be either: The surviving spouse of a disabled public safety employee who sustains an injury in the line of duty that renders the public safety employee 100(%) percent disabled
- 13B.08.13.03C (6) - Be the surviving spouse of a member of the armed forces who suffered a service connected 100(%) percent permanent disability
- 13B.08.13.03C (9) - Be the surviving spouse of a school employee who, as a result of an act of violence:
  - (a) Died in the line of duty; or
  - (b) Sustained an injury in the line of duty that rendered the school employee 100(%) percent disabled.

An applicant may not be eligible to receive the Conroy/Cryor Scholarship if they are a surviving spouse of a member of the United States Armed Forces who died as a result of military service.

For additional criteria such as attending classes and active enrollment on the college's census date each semester, please check with the HCC Financial Aid Office. HCC may need to check with the Maryland Higher Education Commission on individual student eligibility. If you are notified about not being eligible, students have the right to appeal. Please see the HCC website or contact the Financial Aid Office for an appeal form.

By signing this form, you are certifying that all the information reported is correct.

**Student Signature**

**Date**

04/20/26