



**Finish Line Grant Application
Submit to the Financial Aid Office**

Student Name: _____ Student ID#: _____

Email address: _____ Phone #: _____

I am currently enrolled as a student in Curriculum _____ Continuing Education _____

Program of Study Title: _____ Program Code: _____

Are you a US Citizen (Circle One)? Yes No

If you are not, additional information may be requested as part of the awarding process.

Please provide details on the nature of your emergency request.

Supporting documentation for funding requests will be required (e.g., current invoices, quotes). No past due amounts are eligible.

	Check the category	CODE 560	Amount requested (Up to \$1,000)
Childcare		F2CAR	
Housing		F2HOU	
Medical		F2MED	
Dependent Care			
Utility Bills		F2UTI	
Transportation		F2TRA	
Tuition and Fees (has to be approved by State office)		F2COA	
Total amount requested			

Please provide a statement explaining your unexpected emergency (last 30-45 days) and requested expense.

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 Finish Line Grant funds received must be used for the intended purpose.

Finish Line Grant awards may be taxable income reported on 1098-T tax document.

Student Signature: _____ Date of Request: _____



Financial Aid Office Use

Program GPA (Must be 2.0 or higher):	
Currently enrolled in a postsecondary degree of certification program?	
Outstanding balance owed to Business Office?	
US Citizen, Permanent Resident, or DACA recipient?	
Has not exceeded the \$1000 maximum allowance per semester or the \$2000 maximum allowance per year?	
Documentation provided (invoices, quotes, etc.)	
Unmet Need	
Enrollment Hours in current term	

FA Office Representative Name	
Signature	
Date	
FA Director Name	
Signature	
Date	
Date Submitted to Business Office	
Date of Student Notification	
Method of Notification to Student	

Approved ☐

Denied ☐