



**\*USE BLUE INK**

**2017 - 2018 Marion Technical College (MTC) GED Financial Aid Application**

**Please make sure all necessary documentation and eligibility requirements below are met.  
Incomplete or non-eligible applications will not be processed or considered.**

**Part 1**

- **Student must be identified as a potential eligible applicant by the MTC GED department.**
- Student must have attended MTC GED classes with satisfactory attendance.
- Student must complete the MTC GED Graduate Financial Aid Application.
- Student must submit a copy of their completed MyCareerShines career inventories.
- Student must submit a typed essay of 350-500 words responding to the following questions:
  - How will you apply what you learned through your educational journey to continue your career pathway?
  - Why did you choose the career pathway for which you are applying?
  - How does continuing your education help you achieve your life goals?
- Student must provide proof of Florida residency. A residency affidavit must be signed and on file with the MTC Student Services Department upon admission to ensure in-state tuition eligibility.
- Student must complete a 17-18 FAFSA application prior to submitting MTC GED Graduate Financial Aid Application. The FAFSA is to be used for additional funding opportunities throughout the program. Go to: [www.fafsa.gov](http://www.fafsa.gov) to complete using school code 031039.
- Student must provide proof of State of Florida High School Diploma.
- Exhibit financial need.
- Student must submit the MTC GED Graduate Financial Aid Application to the MTC GED Department by May 15, 2017.

**Eligibility Requirements and GED Financial Aid Award Information**

- Students must be accepted into a MTC Certificate Program.
- Students receiving this award will be monitored for attendance and grades. If satisfactory academic progress of a minimum "C" average or higher and 90% attendance is NOT maintained, funds will be revoked.
- Programs may need to be capped based on fund availability. The MTC Financial Aid Fund balance is reviewed annually, or as necessary to ensure fund sustainability.
- The student must **not be in default on any student loan(s) or owe a repayment on any Federal Grant.** It is the responsibility of the student to immediately inform the financial aid office of any change in information. The student's SSN will be used as an identifier.

**Note:** The Financial Aid Administrator may amend this contract or awards as necessary on a case by case basis.



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Financial Aid office use only:

Student ID#

**2017 – 2018 Marion Technical College GED Financial Aid Application**

**Please Type or Print**

Date received in Financial Aid:

Name: \_\_\_\_\_ Last 4 SSN #: \_\_\_\_\_  
Name on SS card (Last) (First) (MI)

Complete Mailing Address: (Street or P. O Box): \_\_\_\_\_

(City): \_\_\_\_\_, (State): \_\_\_\_\_, (Zip Code): \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Program Title: \_\_\_\_\_ Program Length: \_\_\_\_\_

Program Start Date: \_\_\_\_\_ Expected Graduation Date: \_\_\_\_\_

I, **(print legal name)** \_\_\_\_\_ understand that eligibility for Marion Technical College Financial Aid award disbursement, requires my agreement to abide by the following guidelines.

- I understand this award is NOT automatically renewed for the next term. I must apply every term. I am responsible for making satisfactory academic progress.
- Satisfactory Academic Progress (SAP) criteria = minimum of a “C” average or higher, 90% attendance, and completion of program within the scheduled time.
- My attitude, cooperation, and professionalism with regard to the program and other students and instructors will be evaluated by the instructor prior to re-issuance.
- My position as a Marion Technical College Financial Aid award recipient is privileged information and is to be kept confidential.
- I understand that I am responsible for payment of any and all fees that are not covered by this award prior to the first day of class unless other payment arrangements have been made.
- I understand that failure to complete the program of study covered by this financial aid award will result in fees owed.

\_\_\_\_\_  
Student Signature Date:

\_\_\_\_\_  
Financial Aid Signature Date:

Marion Technical College Financial Aid Committee

_____ Anissa Damon	Approve	Deny	_____ Earl Scott	Approve	Deny
_____ Sandra Dailey	Approve	Deny	_____ Cheryl Sirmons	Approve	Deny
_____ Dee Holcomb	Approve	Deny			