



North Carolina Community Colleges
2022-2023 GEER II Application



Instructions: Complete this application and return it to your college’s Continuing Education Registration & Records Office in Building 8. Include all supporting documentation for the scholarship you are applying for. If you have questions, please contact the Continuing Education Registration & Records Office at 252-940-6375 or email continuingeducation@beaufortccc.edu.

Name Scholarship Applying For: **North Carolina Community College Workforce Resilience Grant Program (GEER II).** Provides scholarships of up to \$750 for Workforce Continuing Education students who are able to attest they are a resident of NC, employed in NC, or intend to be employed in NC. Scholarships help cover the cost of tuition, fees, books, supplies, assistive technology, transportation, childcare and other components of the total cost of attendance for students enrolling in pathways/courses leading to an NC Workforce Credential identified as either Essential or Career Level. See <https://nccareers.org/credentials/credentials-list>.

College: **Beaufort County Community College**

Personal Information:

Full Name: _____

Street Address: _____

City, State, Zip Code: _____

Phone Number: _____ E-Mail Address: _____

Educational Information:

Select Workforce Continuing Education Training Program:

<input type="checkbox"/> HVAC Level I	<input type="checkbox"/> Pharmacy Technician	<input type="checkbox"/> Registered Medical Assistant
<input type="checkbox"/> HVAC Level II	<input type="checkbox"/> Nurse Aide I	<input type="checkbox"/> Community Health Worker
<input type="checkbox"/> HVAC Level III	<input type="checkbox"/> Nurse Aide II	<input type="checkbox"/> Registered Barber
<input type="checkbox"/> Nail Technician	<input type="checkbox"/> Natural Hair Care Specialist	<input type="checkbox"/> Esthetician
<input type="checkbox"/> EMT	<input type="checkbox"/> Advanced EMT	<input type="checkbox"/> Paramedic
<input type="checkbox"/> BLET	<input type="checkbox"/> NC Real Estate License	<input type="checkbox"/> CDL

Eligibility Criteria: (initial and date)

_____ I self-attest that I am a resident of North Carolina, employed in North Carolina, or intend to be employed in North Carolina.

Acknowledgement and Certification: I have read and understand the requirements for assistance. I hereby declare that the information provided on this form is complete and correct to the best of my knowledge.

Applicant’s Signature: _____ **Date:** _____

Submit application to the Beaufort County Community College Continuing Education Registration & Records Office in Building 8. Call 252-940-6375 or email continuingeducation@beaufortccc.edu with questions.