



# BEAUFORT

COUNTY COMMUNITY COLLEGE  
Office of Financial Aid

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**2021-2022**

## Beaufort Promise Scholarship Application

The Beaufort Promise Scholarship is a last dollar scholarship to cover eligible recipients' in-state tuition and fees **ONLY**. To be eligible, students must complete the FAFSA application process, be in good academic standing (SAP), have no outstanding debt to the College and have had no student conduct issues. To begin the eligibility process, complete this application in its entirety and return it to the Financial Aid office. Incomplete applications **will not** be considered.

Name \_\_\_\_\_ Student ID/SSN \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Telephone Number \_\_\_\_\_ Email \_\_\_\_\_

Program of Study/Major \_\_\_\_\_

Are you a NC resident?  Yes  No Date of Birth \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Have you completed the BCCC admission application process?  Yes  No

Have you submitted the 2021-22 Free Application for Federal Student Aid (FAFSA)?  Yes  No; If no, please explain: \_\_\_\_\_

Are you receiving other types of financial assistance not awarded by BCCC?  Yes  No If yes, please list other aid:

Award Type	Amount	Term (Fall, Spring, Summer)

I authorize Beaufort County Community College to validate any information provided on this application. I agree I must meet satisfactory academic progress (SAP) and allow BCCC to apply the Beaufort Promise scholarship funds to my student account to cover in-state tuition and fees. My signature below certifies that I have read and understand the above requirements for being a scholarship recipient and that the information provided is true, complete, and accurate to the best of my knowledge.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

## FINANICAL AID OFFICE USE ONLY

Date application received: \_\_\_\_\_

Term:  Fall  Spring  Summer

Hours Enrolled for Term: \_\_\_\_\_

Tuition & Fees Amount: \_\_\_\_\_

21-22 FAFSA received:  Yes  No; If no, explain in comment section

COA: \_\_\_\_\_

EFC: \_\_\_\_\_

Remaining Need: \_\_\_\_\_

SAP:  Satisfactory  Unsatisfactory

Financial Aid Received	Amount
Pell	
State Grants	
Longleaf Grant	
Foundation Scholarships	
Other: _____	
<b>Total Amount of Aid Received</b>	

Eligible for Beaufort Promise:  Yes  No

Amount remaining to cover tuition & fees: \_\_\_\_\_

Beaufort Promise Scholarship entered in Colleague:  Yes  No

Comments/Notes:

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\_\_\_\_\_  
Financial Aid Administrator

\_\_\_\_\_  
Date