

19ASCH
 2018-2019 AIMS SCHOLARS SCHOLARSHIP **FALL/SPRING** APPLICATION
 Returning Aims Students Only



Financial Aid Office
 5401 West 20th St. Greeley CO 80634
 Phone: (970)339-6548 Fax: (970)506-6962

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Student Name (Please Print) _____ Phone: _____

Application processing will begin once all the prior semester grades have been turned in by faculty, therefore, awards may not be available the first day of the awarding semester.

TO APPLY:

1. Read the following information and requirements for the Aims Scholars Scholarship.
2. Submit completed Aims Scholars scholarship application to the financial aid office for processing.

PLEASE NOTE:

1. Although the Aims Scholars Scholarship is not based on financial need, state and federal laws require that we coordinate awards with all other grants, scholarships, work-study, and/or loans you are receiving.
2. Awards will be made for remaining semesters of academic year in which application is received.
3. Awards will not be made for prior terms.
4. The Aims Scholars Scholarship will **NOT** be made in conjunction, substitute, or replace any Aims' funded scholarship including the Aims Opportunity Scholarship and the CTE Short Program Scholarship once awarded.
5. VA students receiving Chapter 33 educational benefits, this scholarship may cause a reduction or possibly a loss of your VA educational benefits.
6. **High school concurrently enrolled students and students who have already earned a 4 year college degree are NOT eligible to receive this scholarship.** Preference may be given to students who have not earned a 2 year college degree prior to awarding period.
7. *All awards are subject to the availability of funds.*

REQUIREMENTS:

1. Declare a **financial aid eligible degree or certificate program** with Admissions, Registration, & Records office.
2. Must be enrolled for **at least six credits** (half-time enrollment status) during awarding period.
3. Demonstrate at least a **3.0 cumulative undergraduate grade point average**.
4. Must have earned a minimum of **twelve (12) undergraduate level** (courses with a course number of 100 or above) credits that assign grades (A-F) at Aims Community College.
5. **Not in default** on a federal student loan or **owe a repayment** of a federal grant and/or loan.
6. **Not on financial aid ineligibility** at Aims Community College.
7. Have not exceeded **maximum credits limit** for degree or certificate program.

Awards are based on expected full-time enrollment. Recipients enrolling less than full-time will receive awards as indicated below:

Enrollment Status	Award Amount Per Semester
Full-Time - 12 or more credit hours	\$900
Three-Quarter Time - 9 to 11.9 credit hours	\$675
Half-Time - 6 to 8.9 credit hours	\$450
Less than Half-Time - 1 to 5.9 credit hours	-0-

Students are responsible for tuition, course fees, and books that are in excess of eligible award as indicated according to Aims' standard payment schedule.

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Student Name (Please Print) _____

Phone: _____

Indicate you understand and agree the financial aid office will be using your most recent Aims transcript to document your eligibility: Please use my most recent Aims CC transcript

I, _____, swear or affirm under penalty of perjury under the law of the State of Colorado that (**check one**):

____ I am a United States citizen

OR

____ I am a permanent resident/naturalized citizen of the United States.

****Students who receive in-state tuition classification status under the Colorado ASSET legislation are NOT eligible for this scholarship.**

I understand that this sworn statement is required by law because I have applied for a public benefit. I understand that state law requires me to provide proof that I am lawfully present in the United States prior to receipt of this public benefit. I further acknowledge that making a false, fictitious, or fraudulent statement or representation in this sworn affidavit is punishable under the criminal laws of Colorado as perjury in the second degree under Colorado Revised Statute 18-8-503 and it shall constitute a separate criminal offense each time a public benefit is fraudulently received. I certify that I have read and understand the information on this application and that the information is accurate and complete. I understand that my application for the Aims Scholars Scholarship will not be evaluated nor an award made until I have met all requirements of this program.

Student Signature

Date

OFFICE USE ONLY

Received Application: ____/____/____

Term: **Fall – 201920 | Spring – 201940**

RRAAREQ: Meets Eligibility Requirements: __Y__/_N__

SOAHOLD: __N__/_Y__: _____ SFAREGF: Credit Hours: _____

SGASTDN: PRGRM: _____/ELIG: _____

SGASTDN: Eligible citizenship: __Y__/_N__

RSIHIST: Taken: _____/Passed: _____/GPA: _____

ROASTAT: EFC: _____/Unmet Need: _____

ROASTAT: SAP G / W / P / I / MAX / AP / NR

RPAAWRD: **Fall:** __N__/_Y__ | **Spring:** __N__/_Y__

RHACOMM: __Y__/_N__ RRAAREQ: __A__/_D__

SPAIDEN: Email Sent: __Y__/_N__

Comments: _____

Date Processed: _____

Outcome: A / D

INITIALS: _____