

Grant Aid Checklist:

- € I am a Pell Grant recipient
- € I have completed 3 Project Aim counseling meetings throughout this semester including my IEP
- € I have attended at least 2 Project Aim workshops (full attendance at orientation fulfills this requirement) or approved service activities (recorded and signed on Activity Form)
- € I have completed and turned-in the Mentorship form documenting 3 meetings with mentor (only required for Freshman)
- € I have received tutoring (only required for students who repeated a developmental course twice or more. Tutoring outside of Project AIM must be verified and proven by using Project AIM's activity form.)
- € I am enrolled in at least one General Education course, math or English course OR have completed all General Education requirements
- € I anticipate a 2.5 semester GPA or higher (only GPA of 2.5 or higher will be eligible)
- € I have completed and signed the Grant Aid form attached with my Activity Form
- € I have submitted my application with Activity Form before May 11th (no late applications will be considered)

Any additional activities, tutoring, workshops that are documented on your Activity Form will earn you more points on the Grant Aid Application. Please visit 5204 Student Center if you have any questions.

PRINT NAME

DATE

SIGNATURE

STAFF NAME/INITIALS

DATE

Please Note Project AIM will only verify what is written by student.

Name: _____

Date of Application: _____

Major: _____

Date of Birth: _____

Student ID#: _____

Home Phone#: _____

| STUDENTS COMPLETE THIS SECTION ONLY | | Point Value | Confirmed by F/T Staff | Score |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------------|-------|
| Please note: Sections A, B, C and D are MANDATORY! | | | | |
| A | Met with Counselor 3 times this semester (including completed an IEP) ____ Yes ____ No Date: _____ Date: _____ Date: _____ | 1 | | |
| B | ____ I am involved this semester with Project AIM's mentorship program: (Mandatory for students with 0-29 credits) Mentor: _____ Date(s) met: _____ | 1 | | |
| C | ____ I have fulfilled the workshop requirement as approved by the Director | 1 (2) 2 (3-4) 3 (5 or more) | | |
| D | ____ I have completed as many tutoring sessions as needed to show a meaningful effort towards receiving a satisfactory grade in developmental and/or repeated courses. Tutor(s) _____ Subject Area(s): _____ | 2 (1-2) 3 (3-4) 4 (5 or more) | | |
| ____ I am a <u>current officer</u> of the following GCC club OR a representative of COPSA: ____ I participated in the following GCC function(s) i.e., Mini-Conferences, 5k Run (must provide proof of attendance signed by a committee member or use activity form w/signature by official) | | 1 (1-2) 2 (3-4) 3 (5 or more) | | |
| ____ I am a member of Phi Theta Kappa Date Inducted: _____ | | 1 | | |
| I understand that I must be a Pell Grant recipient and meet all of the pre-screening qualifications to be considered for Grant Aid. I verify that all of the above information is true and correct. Additionally, I understand that if I complete the official use only portion or that if any of the information I have completed is found to be falsified, this grant application will be considered null and void. I also understand that if this application is not signed that it will be automatically voided. | | | SBTL Minimum to qualify is 5 | |
| Signature: _____ Date: _____ | | | | |
| STUDENT CLASS INFORMATION TO BE COMPLETED BY SCORER (NOT STUDENT): | | | | |
| Number of credits: _____ [] Freshmen [] Sophomore | | | 1 (Freshmen) 2 (Sophomore) | |
| Student Status ____ FT (12 or more credit hours) ____ PT (11 or less credit hours) | | | 1 (Part Time) 2 (Full Time) | |
| Current Semester Grade Point Average: _____ (student must have GPA 2.5 or higher in order to qualify) | | | 1 (2.5 – 2.9) 2 (3.0 – 3.9) 3 (4.0) | |
| ____ Approved ____ Disapproved | | | Total | |

Christine B. Sison, Director

CHECK NUMBER: _____ DATE CHECK ISSUED: _____

PELL Grant for Each Semester:
Fall: _____ Spring: _____ Summer: _____

TOTAL SY (2010-2011) DISBURSEMENT: _____

Please Note Project AIM will only verify what is written by student.