NORTH CAROLINA STATE EDUCATION ASSISTANCE AUTHORITY (NCSEAA)

Read information on back before completing this form.
TYPE OR PRINT NEATLY IN INK.
"X" CORRECT BOXES

APPLICATION FOR THE NORTH CAROLINA LEGISLATIVE TUITION GRANT (NCLTG)*

2010-2011 ACADEMIC YEAR

Submit completed form to authorized college official.
DO NOT SEND TO NCSEAA.

* *The institution may elect to use this form to determine residency for the State Contractual Scholarship Fund program.*

1. Name

Last Name First Name Middle Name

2. Permanent Residential Address (**P O Box # Cannot Be Used**)

Use Physical Street Address or Route Number City or Town State Zip Code County

3. Home Telephone Number w/Area Code

4. Social Security Number _____—_____—_____

5. Birth Date (mm/dd/yy) _____/_____/_____

6. Name and Address of High School (HS) from which you graduated

High School City State

7. Year Graduated From HS _____

8. (a) Are you a citizen of the U. S.? ☐ Yes ☐ No

(b) If No, do you possess an Lawful Permanent Resident 'Green Card' or Alien Registration Card (Form I-551)? ☐ Yes ☐ No

(c) If No, what type of Visa do you hold?_____

9. Parents or Legal Guardian Current Permanent Address (Street or R.F.D., City, State)

_____

If guardian, date of appointment _____

10. Length of Time Parents or Legal Guardian at Current Permanent Address _____Yrs. _____Mos.

11. Are you, your spouse or one of your parents a member of the Armed Forces? ☐ Yes ☐ No

If Yes, identify relationship: ☐ Self ☐ Parent ☐ Spouse

If Yes, is the individual on: ☐ Active Duty ☐ Nat'l Guard ☐ Reserves ☐ Retired

12. (a) As of the first day of class of this School Term, how long have you been a legal NC resident? _____ Yrs. _____ Mos.

(b) Date you became a legal NC Resident (mm/dd/yy) _____.

If you have been a resident in NC for less than 2 years, you are required to complete item 12 (c) giving accurate and appropriate information. You may submit a separate letter explaining any special circumstances to your institution. After reviewing this form, your institution may require more information to determine your residency.

(c) Where (**which state**) and when (**year**) did you complete the following activities during the past three years?

	FILED STATE TAX AS RESIDENT ST/Yr - ST/Yr - ST/Yr	PAID VEHICLE/ PROPERTY TAX ST/Yr - ST/Yr - ST/Yr	REGISTER TO VOTE/VOTED St/Yr	DRIVER'S LICENSE ST/Yr	
1. YOU:					☐ New ☐ Renewed
2. PARENT:					☐ New ☐ Renewed
3. GUARDIAN:					☐ New ☐ Renewed
4. SPOUSE:					☐ New ☐ Renewed

13. As of the first day of class of this School Term, I will be enrolled and classified as a: (X one)

☐ Full-time or Part-time undergraduate seeking my first Associate degree and enrolled in at least 12 or 9 credit hours or the equivalent.

☐ Full-Time undergraduate seeking my first Bachelor degree with at least 12 credit hours or the equivalent.

☐ Part-Time undergraduate seeking my first Bachelor degree with at least 9 credit hours or the equivalent.

☐ Full or Part-Time student who has a Bachelor's degree & is seeking a license as a first-time teacher or nurse.

14. Do you have a previous undergraduate degree? ☐ Yes ☐ No If yes, it is: ☐ Associate ☐ Baccalaureate

If yes, from what institution? _____ .

Continue on reverse side

Any questions concerning this application should be directed to the office that provided this application at your institution.

Name

Last Name First Name Middle Name

15. Selective Service Registration ("X" all applicable blocks)

(a) ☐ I certify that I am registered with the Selective Service.

(b) ☐ I certify that I am not required to be registered with the Selective Service because:

☐ I am a female. ☐ I have not reached my 18th birthday. ☐ I am 26 years old or older.

☐ I am in the military on active duty. (Note: Members of the Reserves and National Guard are not considered to be on active duty.)

STUDENT CERTIFICATION

I hereby swear (or affirm) that the information I have given on this application is true, complete and correct and that to the best of my knowledge and belief I am eligible to be considered for a NCLTG and/or State Contractual Scholarship Fund (SCSF) grants as defined under NC statutes and NCLTG and/or SCSF Rules and persuant to available appropriation. I authorize the school to provide to NCSEAA the information provided on this application to verify my eligibility to receive an NCLTG and/or SCSF grant for the academic period stated. I understand that my Social Security Number will be used in the record system of NCSEAA only as an identifying number. **I also understand that it is my responsibility to complete an Application for NCLTG before the deadline for each year that I expect to receive an award .**

Student's Signature Date

STUDENT SHOULD NOT WRITE BELOW THIS LINE

TO BE COMPLETED BY PRIVATE EDUCATIONAL INSTITUTION

PRIVATE COLLEGE OR UNIVERSITY CERTIFICATION

I hereby certify that the information contained in this statement is true, complete and correct to the best of my knowledge and belief according to the records of this institution. I also hereby certify that I have properly evaluated this application regarding residency for each school term applied for by the student applicant. Based upon information provided by the student applicant, I attest to the eligibility or continued eligibility of the student applicant in accordance with NC statutes and rules governing the NCLTG and/or SCSF programs as administered by the NCSEAA.

Signature of Authorized Official Name of School

Title of Authorized Official Date

ELIGIBILITY

To qualify for a **NCLTG** award, an undergraduate Eligible Student must:

(1) be a resident of NC for the purposes of tuition payment under the *Residence Manual* of The University of North Carolina (UNC),
(2) be enrolled **full-time or part-time** (at least 9 hours) as an undergraduate student in a eligible program as defined in G.S. 116-22(1),
(3) be certified as eligible to the Authority by an approved institution, and
(4) have not received or qualified for a bachelor's degree nor be enrolled in a program of study the objective of which is career preparation for a religious vocation.

To qualify for a **NCLTG** award, a student seeking a first-time license in teaching or nursing must:

(1) have received a baccalaureate degree and be a resident of NC for the purposes of tuition payment under the *Residence Manual* of UNC,
(2) be enrolled **full-time or part-time** (at least 9 hours) in undergraduate course in a program intended to result in licensure as a teacher or a nurse,
(3) be certified as eligible to the Authority by an approved institution, and
(4) have complied with the registration requirements of the Military Service Act.

To qualify for a **SCSF** award, an undergraduate Eligible Student must:

(1) be a resident of NC for the purposes of tuition payment under the terms and conditions of the *Residence Manual* of UNC,
(2) be enrolled **at least part-time** as an undergraduate student in a eligible program as defined in G.S. 116-22(1),
(3) be certified as eligible to the Authority by an approved institution,
(4) have not received or qualified for a bachelor's degree nor be enrolled in a program of study the objective of which is career preparation for a religious vocation, and
(5) be determined by the institution to have financial need, completed Selective Service registration requirements and not be in default or owe a refund under any program authorized by Title IV of the Higher Education Act of 1965.

To qualify for a **SCSF** award, a student seeking a first-time license in teaching or nursing must:

(1) have received a baccalaureate degree and be a resident of NC for the purposes of tuition payment under the *Residence Manual* of UNC,
(2) be enrolled **full-time or part-time** student in a program intended to result in licensure as a teacher or a nurse,
(3) be certified as eligible to the Authority by an approved institution, and
(5) be determined by the institution to have financial need, completed Selective Service registration requirements and not be in default or owe a refund under any program authorized by Title IV of the Higher Education Act of 1965.

Any questions concerning this application should be directed to the office at your institution that provided this application .

COMPLETED APPLICATION TO BE RETURNED TO AND RETAINED BY YOUR EDUCATIONAL INSTITUTION. DO NOT SEND TO NCSEAA.