



Opportunity starts here

Barrett Family Foundation VA Scholarship Application

Clearwater Campus _____

St. Petersburg Campus _____

Name: _____

Program: _____

Current VA Benefits: _____

Assistance Requested:

_____ Books _____ Tuition & Fees percentage _____ Tools

Notes: _____

Requirements-Books & Percentage

Student must maintain academic satisfactory progress, maintaining a 2.5 GPA, based on the program's standard. Satisfactory progress is evaluated after each fee period. A probationary period begins the fee period following an unsatisfactory report for academics. The scholarship funds cannot be accessed during the probationary period. Funds can be accessed again once the probationary period is served and the student is in good standing again.

Student must maintain a minimum of **80% attendance each calendar month** to remain in good standing. If the student exceeds **20% absenteeism in a calendar month, the scholarship benefits will be temporarily discontinued**. Funds can be accessed again once a month is successfully attended at 80% or more. An approved appeal can override the temporary termination of benefits.

Requirements-Tools

Student must attend two complete consecutive terms with satisfactory academic progress with their grades and attendance. At the end of the two terms, the student can bring in a copy of their tools receipt for a reimbursement check. It is the student's responsibility to bring in the receipt for reimbursement (approved and signed by instructor) up to \$200 as long as the funds continue to be available.

____ Withdrawal from the initial program of choice to which scholarship funds were received before completion of the program, student will not have access to the scholarship funds again for six months.

____ I give permission to release my name and educational information to the Barrett Family Foundation to use for promotional and financial tracking purposes.

____ I promise to attend a 45 minute Financial Literacy class the next time it is offered. I understand that I will lose my funding if I do not attend the next class.

I, _____, have read and understand the information provided to me on

this date _____. I have been given a copy of this information for my personal record.

Student's Signature

Financial Aid Representative's Signature

Date

Date