



## FINANCIAL AID

**To be eligible for this grant, a student must meet the following criteria:**

1. You are a current resident of the state of Ohio
2. Your last date of attendance was between two semesters and five years ago
3. You have not yet earned an associate or bachelor's degree from ANY college or university
4. You were in good academic standing with no disciplinary issues when you stopped out
5. You must complete the Free Application for Federal Student Aid (FAFSA) and accept any need-based state or federal grants to which you are entitled
6. You are not a recipient of any of the following Ohio scholarships: Choose Ohio First, Ohio Safety Officers College Memorial Fund, War Orphans and Severely Disabled Veteran's Scholarship Program, Ohio National Guard Scholarship
7. MUST declare a major at Southern State Community College
8. Student must order official transcripts from former institution/institutions to be sent directly to Southern State Community College
9. Submit this application with the Program registration/enrollment form
  - a. This grant only pays for courses that are part of the approved degree/certificate program
  - b. This grant will pay up to a maximum of \$2,000
10. The awarding of this grant is conditional upon the continuance of state funding

**Please print this document and complete it with a wet ink signature. The completed document can be submitted in person, through email, fax, or mail. Our contact information is at the bottom of the page.**

**Please provide the following information:**

Student Name: \_\_\_\_\_ Student ID: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Phone: \_\_\_\_\_

Term Applying for Short-Term Grant: Fall \_\_\_\_\_ Spring \_\_\_\_\_ Summer \_\_\_\_\_ 20\_\_\_\_

**Please review each statement and sign where indicated.**

If I am awarded this grant, I agree to abide by all the conditions of this grant. I understand that if I fail to attend my classes my grant disbursement will be removed from my account, and I may be required to pay any resulting balance due on my Southern State account.

I understand that the Second Chance Grant is offered on a first-come, first-serve basis until all available funds have been distributed. There is no guarantee that funding will still be available in future academic terms

I certify that, to the best of my knowledge and belief at the time and date I have signed below, all information listed on this application is true and accurate.

I authorize Southern State Community College to view my prior financial aid and enrollment history on the National Student Loan Database System or National Clearinghouse websites.

**Student Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Submit Completed Application to:  
**Southern State Community College**  
**Office of Financial Aid**  
**100 Hobart Drive**  
**Hillsboro, OH 45133**  
[financialaid@sscc.edu](mailto:financialaid@sscc.edu)

**FOR OFFICE USE ONLY. DO NOT WRITE IN THIS SECTION:**

Program Eligible: Y\_\_\_N\_\_\_ Multiple Active Programs: Y\_\_\_N\_\_\_ Other Program: \_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_

Title IV Eligible: Y\_\_\_N\_\_\_ FAFSA on File: Y\_\_\_N\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_

Grant Award Amount: \$\_\_\_\_\_

Date Grant Awarded: \_\_\_\_\_