

Blue Cross and Blue Shield of North Carolina (Blue Cross NC) Firefighter Scholarships to Adults

Funded by a Rural Initiatives grant from Blue Cross and Blue Shield of North Carolina

Form B: Firefighter Scholarship to Adults Application

Please confirm if your college is an eligible college and if it is offering this option for the term you are interested in. Return the completed application form to the college Financial Aid Office by the deadline specified by the college.

Scholarship Award: Up to \$1,000 per term (must reapply each term). Funds are disbursed to the student’s account to cover any expenses for the program/courses to cover instructional costs (tuition, fees, books, materials, supplies, etc.) associated with an eligible program as listed below. Any balance of funds will be allocated to the student. **Eligible programs:** Fire Protection Technology, Public Safety Administration, Emergency Management or Emergency Medical Science curriculum associate degree programs and Workforce Continuing Education courses that tie directly to a college’s approved EMS Bridging program and is specifically part of the student’s pathway to EMS associate degree completion. **Eligibility Requirements: 1)** Hold an active NC Firefighter I & II certification; **2)** Successfully complete courses covered by the scholarship in any previous term to be eligible for funding in a subsequent term.

College Name	
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Student Information (please print)

<i>Full Name</i>	
<i>Home Address</i>	
<i>City/State/Zip Code</i>	
<i>Email Address</i>	
<i>Phone Number</i>	
<i>Mobile Number</i>	

Specify Term Applying For: _____ (Example: Fall 2021, Spring 2022, Summer 2022)

List eligible course(s)/associated degree program student has enrolled in for the term specified:

- I have provided evidence that I have an active Firefighter I&II certification.
- If I was awarded this scholarship in the past, I have provided evidence of successfully completing previous courses.
- I have read and understand the requirements for this funding. I hereby declare that the information provided on this form is complete and correct to the best of my knowledge.

Applicant’s Signature

Date