

SOUTHWEST TENNESSEE COMMUNITY COLLEGE

CCAMPIS Scholarship Application

Eligibility Requirements:

- Must be the custodial parent of a child/children needing child care
- Must be a current enrolled student at Southwest Tennessee Community College
- Must be eligible to receive a Pell Grant (and have submitted a FAFSA for the current academic year)
- Must be in good academic standing with a 2.0 or higher cumulative GPA (excluding first time college students)
- Submission of short essay describing your need for the CCAMPIS assistance

For Office Use

Date Received: _____

Received by: _____

Previously Served: _____

Name: _____ Banner ID# _____

Address: _____ Contact # _____

Second contact # _____

Email Address: _____ D. O. B. _____

Gender: ☐ Male ☐ Female Ethnicity: ☐ BLK ☐ White ☐ Hispanic ☐ Asian Other: _____

Marital Status: ☐ Married ☐ Single ☐ Divorced ☐ Widowed ☐ Separated Does spouse attend school? ☐ Y ☐ N

Enrollment Status: ☐ Freshman (29hrs. or less) ☐ Sophomore (30 hrs. or more) What is your Major? _____

Your goal is to receive: ☐ 2 Year Degree ☐ Certificate ☐ Enhancement Expected Graduation date: _____

How long have you been working on your degree? _____ Semesters _____ Years / # of credit hours to graduate _____

List child(ren)'s names and DOB:

Are you Head of Household? ☐ Y ☐ N

1. _____

Living Status: ☐ Independent ☐ With Parents

2. _____

Are you currently receiving a Pell Grant? ☐ Y ☐ N

3. _____

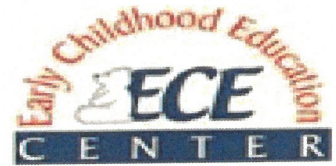
Which campus are you interested in your child(ren) attending? ☐ Union ☐ Macon

Are you currently employed? ☐ Yes ☐ No If yes: ☐ FT ☐ PT Yearly Income: _____ Employer: _____

I certify that the information on this application is true and complete. I authorize information regarding my scholarship application, academic record, and financial aid award info released to the Southwest Tennessee Community College Child Care Center CCAMPIS staff. I understand that the CCAMPIS staff may require additional documentation to verify the completion or accuracy of this application, and I agree to the release of such information and documentation.

Signature

Date



SOUTHWEST TENNESSEE COMMUNITY COLLEGE

CCAMPIS Summer Scholarship Application

Name: _____ Banner ID# _____

Address: _____ Contact # _____

_____ Second contact # _____

Email Address: _____ D. O. B _____

Gender: ☐ Male ☐ Female Ethnicity: ☐ BLK ☐ White ☐ Hispanic ☐ Asian Other: _____

Marital Status: ☐ Married ☐ Single ☐ Divorced ☐ Widowed ☐ Separated Does spouse attend school? ☐ Y ☐ N

Enrollment Status: ☐ Freshman (29hrs. or less) ☐ Sophomore (30 hrs. or more) What is your Major? _____

Your goal is to receive: ☐ 2 Year Degree ☐ Certificate ☐ Enhancement Expected Graduation date: _____

How long have you been working on your degree? _____ Semesters _____ Years / # of credit hours to graduate _____

Are you Head of Household? ☐ Y ☐ N Living Status: ☐ Independent ☐ With Parents

Are you currently receiving a Pell Grant? ☐ Y ☐ N

Which campus are you interested in your child(ren) attending? ☐ Union ☐ Macon

Are you currently employed? ☐ Yes ☐ No If yes: ☐ FT ☐ PT Employer: _____

Schedule: _____

List child(ren)'s names and DOB:

1. _____

2. _____

3. _____

4. _____

Submission of short essay or video describing your need for CCAMPIS assistance Attached/Submitted ☐ Yes ☐ No

Spring Grades Attached/Submitted ☐ Yes ☐ No

I certify that the information on this application is true and complete. I authorize information regarding my scholarship application, academic record, and financial aid award info released to the Southwest Tennessee Community College Child Care Center CCAMPIS staff. I understand that the CCAMPIS staff may require additional documentation to verify the completion or accuracy of this application, and I agree to the release of such information and documentation.

Signature

Date



CCAMPIS GRANT PARENT AGREEMENT

As a recipient of the CCAMPIS grant I, _____ agree to
The following terms to be completed each semester:

- Participation in all activities as required by the CCAMPIS grant. (When permitted)
- Report grades at the end of each semester. (Within 2 weeks)
- Keep all information current and up to date, including withdrawal from classes, address and phone number change.
- Complete an annual CCAMPIS parent survey.
- Meet with your Academic Advisor once a semester
- All Child Care fees must be current at all times. Failure to pay for more than two consecutive weeks will result in cancellation of your CCAMPIS and a new Payment Agreement must be filled out.

If a parent is receiving CCAMPIS and the child's attendance is irregular, the child will be dropped from CCAMPIS. A new payment agreement must be completed in the front office at the regular student rates.

IF YOUR PORTION OF CHILD CARE FEES ARE NOT CURRENT AFTER TWO WEEKS, YOU WILL BE RESPONSIBLE FOR THE ENTIRE AMOUNT OF CHILD CARE FEES WITHOUT THE CCAMPIS DISCOUNT.

If I stop attending school without informing the child care center I will be responsible for all child care charges incurred starting from the date of non-attendance. I further understand that my name will be sent over to the cashier's office for collections and a hold may be placed on all student academic and or financial aid records.

Parent's Signature

Date

If you are dropped from CCAMPIS for noncompliance of any of the above requirements, you will be ineligible to receive CCAMPIS the following semester. Your name will go back on the waiting list and will be served on a first come basis. If you agree to the following terms and conditions, please sign and date below.

Parent's Signature

Date

Coordinator's Signature

Date



CCAMPIS ACADEMIC ADVISORY MEETING

As a requirement of my participation in the Child Care Access Means Parents in School (CCAMPIS) grant, I am required to meet with my academic advisory once per semester. This meeting is designed to ensure that I stay on target with my academic goals and to make sure that any academic barriers are addressed before they become issues of concern.

Southwest Tennessee Community College Academic Advisor

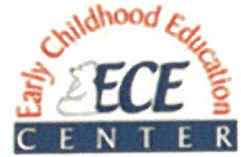
Extension

Date of Meeting

CCAMPIS Parent's Signature

Date

Print Name



CCAMPIS FINANCIAL AID AUTHORIZATION OF RELEASE

As a condition of my participation in the CCAMPIS program at Southwest Tennessee Community College Child Care Center, I understand that being Pell grant eligible is a requirement for the CCAMPIS grant. Failure to report changes in my status as a Pell grant recipient may disqualify me from participating in the CCAMPIS program.

I _____ authorize the Southwest Tennessee Community College Financial Aid department to release financial aid records to a Southwest Tennessee Community College Campus Child Care Center CCAMPIS representative.

Parent's Signature

Date

Campus Child Center's Staff

Date

CCAMPIS ACADEMIC AUTHORIZATION OF RELEASE

As a condition of my participation in the CCAMPIS program at Southwest Tennessee Community College Child Care Center, I understand that being in good academic standing with the college is a requirement for the CCAMPIS grant. Failure to maintain good academic of at least a 2.0 grade point average may disqualify my participation of the CCAMPIS program.

I _____ authorize Southwest Tennessee Community College Academic department to release academic records to Southwest Tennessee Community College Campus Child Care Center CCAMPIS representative.

Parent's Signature

Date

Campus Child Center's Staff

Date



Child Care Access Means Parents in School

CCAMPIS



CCAMPIS PARENT ACTIVITY ACKNOWLEDGMENT AND AGREEMENT

CCAMPIS participants are required to volunteer for at least one parent activity or event per semester and attend at least one parent training per semester.

Parents must arrange with their child's teacher, the CCAMPIS Coordinator, or the Assistant Director when they are interested in participating in a Parent Activity, or Events, Calendars with scheduled events and activities for each month, will be available for parents at your child's center. The CCAMPIS Coordinator or the Assistant Director will schedule parent trainings. Parent Trainings are different from Parent Activities and Events. Parents will be informed of any upcoming trainings at least 30 days in advance.

PLEASE DO NOT WAIT UNTIL THE LAST MINUTE TO FULFILL THIS OBLIGATION.

FAILURE TO MEET THIS REQUIREMENT WILL RESULT IN DISQUALIFICATION IN THE CCAMPIS PROGRAM.

Parent's Signature

Date

Coordinator's Signature

Date

CCAMPIS Short essay

As a requirement of the CCAMPIS grant, participants are required to submit a short essay describing their child care needs as students or parents. Please take a few moments to express your needs in the space provided below.

[illegible]

Parent's Signature

Date _____

Print Name