

Kansas Promise Scholarship Application

The Kansas Promise Scholarship was created during the 2021 Kansas Legislative Session to assist students attending Kansas community colleges, technical colleges, Washburn Institute of Technology and certain private postsecondary educational institutions and enrolled in specified programs of study, generally in the fields of (1) information technology and security, (2) mental and physical health care, (3) advanced manufacturing and building trades, or (4) early childhood education and development. Your college also has one other eligible program area. Talk with your college about other eligible areas of study that may qualify for this scholarship. This scholarship may be used toward tuition, required fees, books, and required program materials. Your educational institution will determine the amount of your Promise Scholarship award based on information from the Free Application for Federal Student Aid (FAFSA) along with other financial aid that you may be receiving.

To be eligible for the Kansas Promise Scholarship you must:

- Be a Kansas resident, **AND**
- Have graduated from a Kansas high school within the preceding 12 months or have received a GED or other high school equivalency credential within the preceding 12 months, **OR**
- Be 21 years of age or older and a Kansas resident for the preceding three consecutive years, **OR**
- Be a dependent child of a military servicemember who is stationed in another state and who, within the preceding 12 months, graduated from an out-of-state high school or obtained a GED or other high school equivalency credential.

To apply and remain qualified for the Kansas Promise Scholarship you must:

- Complete the Kansas Promise Scholarship application and **submit the application to your school's financial aid office; AND**
- Complete the Free Application for Federal Student Aid (FAFSA); **AND**
- Enroll in an eligible program of study; **AND**
- Sign a Kansas Promise Scholarship Agreement that you agree to live and work in Kansas for a minimum of two consecutive years following successful completion of your program; **AND**
- Successfully complete an eligible program of study within 30 months of first being awarded a Kansas Promise Scholarship.

You do not need to be eligible for a Pell Grant or accept student loans or work study to receive the Kansas Promise Scholarship. You may be enrolled either part-time (minimum of 6 hours) or full-time (minimum of 12 hours) but you must complete your program of study within 30 months of the time in which you are first awarded the Kansas Promise Scholarship.

It is **very important** to understand that by accepting a Kansas Promise Scholarship you will be signing an Agreement that you will live and work in the State of Kansas for two consecutive years following the successful completion of your program of study. Failure to do so will result in your having to repay the amount of the scholarship assistance that you received plus interest. The interest is at the current rate of interest of the federal PLUS loan (Parent Loan) at the time that you are awarded the scholarship. The PLUS interest rate is 6.284% beginning July 1, 2021 through June 30, 2022.

If your program of study continues beyond one year, you will need to complete a Kansas Promise Scholarship Renewal Application to continue to be eligible for funding.

KANSAS PROMISE SCHOLARSHIP ACT

STUDENT APPLICATION

An application must be submitted to the Student Financial Aid Office of the student's educational institution for consideration for this scholarship. Students must also complete the Free Application for Federal Student Aid (FAFSA) Form.

A. CONTACT INFORMATION

Student Name: _____
Last First M.I.

Are there any previous names (married, maiden or alias) that you have used? Yes No

If so, please provide: _____

Social Security Number: _____ - _____ - _____ Date of Birth: _____ - _____ - _____

Current Address: _____
Street Address City State Zip Code

Permanent Address (if different from above):

_____ Street Address City State Zip Code

Email Address: _____

Cell Phone Number: _____ Home Phone Number: _____

B. RESIDENCY INFORMATION

Have you lived continuously in Kansas since birth? Yes No

If no, indicate the month and year you began living continuously in Kansas: _____

Are you a dependent child of a military service member who is permanently stationed in another state?

Yes No

C. EDUCATION

Name of High School: _____

City, State: _____

High School Graduation Date: _____
Month/Year

OR, High School Equivalency Exam (or GED) – Date Passed: _____
Month/Year

Name the Kansas postsecondary educational institution will you attend:

What program of study will you pursue? *Promise scholarship recipients who change programs of study may have to repay the scholarship. Read the certification below before applying.*

Check one: Do you plan to enroll part-time (6 to 11 hours)? or full-time (12+ hours)?

Anticipated date of program completion*: _____
Month/Year

*Students must complete their program within 30 months of receiving the Promise Scholarship.

Scholarship Certification Statement:

I certify that the information provided herein is complete and correct to the best of my knowledge, and that I have read and understand the description of the Kansas Promise Service Scholarship for which I am applying. I also certify that I understand the information that I have provided will be used to determine my scholarship eligibility. I affirm that all the information I have provided on this form is true. If asked by an authorized official, I agree to provide proof of the information that I have given on this form. I also understand that if I receive a Promise Service Scholarship that I will be obligated to sign a Service Agreement, as required by the Kansas Promise Scholarship Act.

Furthermore, **I understand that there is a service obligation** for accepting a Kansas Promise Service Scholarship and if I default on the obligation in any of the manners identified in the Kansas Promise Scholarship Agreement, the amount of the scholarship I received **must be repaid** with the interest that has accrued from the date of origination of the award.

Signature: _____ Date: _____

PLEASE SUBMIT THIS APPLICATION TO YOUR SCHOOL'S FINANCIAL AID OFFICE

School officials only:

Student's declared program of study: _____

CIP Code of Program: _____

Institution: _____

FAA Signature: _____

Print Name/Title: _____

Financial Aid Office Calculations Only:

Direct Cost of Attendance, Tuition and Required Fees: _____

Direct Cost of Attendance, Books and Required Materials: _____

Total Direct Cost of Attendance: _____

(Minus) Total Aid Received: _____

Kansas Promise Scholarship Eligible Amount: _____