

First Coast Technical College

Applications must be submitted in-person to the Office of Student Financial Aid (Building A). All the information requested below must be provided. Incomplete applications will be denied.

Student Name: _____ **Student ID#:** _____
 (First) (MI) (Last)

Address: _____ **Apt/Unit:** _____ **City:** _____ **State:** _____ **Zip:** _____

Phone Number: _____ **Email:** _____

Date of Birth: ____/____/____ **Gender:** M F **Social Security Number:** _____-____-_____

Race: American Indian/Alaska Native Asian Black/African American Native Hawaiian/Pacific Islander White Other

Ethnicity: Hispanic/Latino Not Hispanic/Latino

Veteran Status: Active Duty Personnel, Member of the National Guard or Reserves Veteran (Prior service, not active duty) No military history

Enrollment Status: Currently Enrolled Student New Student

QUALIFICATION CRITERIA (Answer the questions below):

- I am enrolled in a First Responder Program:** Paramedic Firefighting Emergency Medical Technician EMT/Fire Combo
- Are you receiving any additional financial aid/funding:** Pell Scholarships Veteran's Benefits CareerSource
 Goodwill Bright Futures Career Navigator Employer Assistance Other: _____

PLEASE READ CAREFULLY

- Applications must be submitted in-person to the Office of Student Financial Aid (Building A).
- The Florida First Responder Scholarships is for Students enrolled in a First Responder Program: Emergency Medical Technicians (EMT), Paramedic, Firefighter, or EMT/Fire Combo. Starting January 6th, 2025 through June 30th, 2025.
- Funds are subject to availability and priority is given to currently enrolled students.
- Students who are considered non-Florida residents will be responsible for any out-of-state fees.
- The Florida First Responder Scholarship funds are applied after federal and state aid or third-party payments, to cover a maximum award equal to the amount needed to cover 100% of tuition for the term.
- First Coast Technical College is required to reduce or cancel the grant award if the student later becomes eligible for other financial assistance during the 2024-25 school year.
- Awarded funds only apply to the program for which the application is submitted.
- Florida First Responder Scholarship Program will not pay for a repeat course(s)/program

I attest that all the information provided in this application is accurate, complete and correct. I understand that falsification of such information shall result in the denial of a pending application and revocation of an award or grant currently held to the extent that no further payments shall be made. Additionally, I understand that individuals who knowingly make false statements in order to receive state financial aid awards or tuition assistance grants commit a misdemeanor of the second degree subject to the provisions of s. 837.06 and shall be required to return all state financial aid awards or tuition assistance grants wrongfully obtained.

Student Signature

Date

OFFICE USE

FA Advisor: _____ **Hours Enrolled (Master Schedule):** _____ **Eligibility Date:** ____/____/____ **CIP Code:** _____

Program Cost of Attendance: \$ _____ **Tuition and Fee Cost:** \$ _____ **Books/Supplies Cost:** \$ _____

Stipend: \$ _____ **Federal Financial Aid:** \$ _____ **State Financial Aid:** \$ _____

Reason for Denial

- Incomplete Application Non-eligible Program Fully Covered/Tuition Exemption Depleted/Expired Grant
 Outside Processing Window