



OFFICE OF STUDENT FINANCIAL AID  
 CENTRAL CAROLINA COMMUNITY COLLEGE  
 Hockaday Building, Lee Main Campus  
 1105 Kelly Drive  
 Sanford, NC 27330  
 T 919.718.7229 Email: [finaid@cccc.edu](mailto:finaid@cccc.edu)  
 F 919.718.7410 Website: [cccc.edu/financialaid](http://cccc.edu/financialaid)

Name:	
CCCC Student ID:	
Telephone Number:	( ____ ) _____ - _____

## Outside Award Submission Form

*To be completed by the provider/administrator of this scholarship award.*

**Mail all payments to the following address:**

Business Office  
 Hockaday Hall, Building 09  
 1105 Kelly Drive  
 Sanford, NC 27330

**Scholarship Information**

Full Scholarship Name: \_\_\_\_\_

Payment Information:

Term(s) that scholarship should be applied:

*If not indicated, we will split evenly between Fall and Spring*

Award Amount:	\$
Check Date:	
Check #:	

Fall 2022	<input type="checkbox"/>
Spring 2023	<input type="checkbox"/>
Summer 2023	<input type="checkbox"/>

**Provider Information**

Full Company/Donor Name: \_\_\_\_\_

Contact Information:

Contact Name:		Phone #:	
Position:		Email Address:	
Address:			

**Supplemental Information**

1. What is the minimum amount of credit hours the student(s) must be enrolled to receive the scholarship?  
 1-5 credit hours(less than half time)     6-11 credit hours (half-time)     12 credit hours (full time)
2. Funds may be applied towards (check one):  Tuition/Fees     Books/Supplies     All Charges
3. Do you wish for the excess funds to be applied:  Refund to Student     Returned to Donor
4. Any other stipulations of the scholarship: \_\_\_\_\_

Signature of Donor: \_\_\_\_\_

Date: \_\_\_\_\_

*Questions or Concerns: Feel free to contact the Outside Scholarship Specialist at [nlari348@cccc.edu](mailto:nlari348@cccc.edu) or call 919.718.7222*

**Award Code (for internal use only):** \_\_\_\_\_