



Accelerating Opportunity I-CAPS Achievement Award

Application

Name _____

Date of birth _____ BHC Student ID# _____

Major _____

Educational goals _____

Financial Aid information *(list any financial assistance you are receiving for the semester)*

Grants

Pell Grant Amount \$

Map Grant Amount \$

Scholarships *(include funding from Perkins or Partners in Job Training)*

Name [Click here to enter text.](#) Amount \$

Name [Click here to enter text.](#) Amount \$ [Click here to enter text.](#)

Total Amount \$ [Click here to enter text.](#)

Date of application _____ Term applied for _____

Signature of applicant

For office use only:

Applicant is eligible: yes no

By (initials): _____

BHC Accelerating Opportunity I-CAPS Achievement Award

Agreement

Black Hawk College grants an Accelerating Opportunity I-CAPS Achievement Award to

(Name) _____ BHC ID# _____

This award is for ___ Fall Semester ___ Spring Semester 20_____

This grant consists of waiving tuition only for 3 credit hours for fall or spring semester and is renewable up to a maximum of 2 semesters total.

Lab fees and all other fees are not covered by this award.

In order to receive or renew this award, the above-name recipient must meet the requirements stated below. The student agrees to:

1. Enroll and receive credit for a minimum of 12 credit hours each semester
2. Maintain a cumulative grade point average of 2.5 or higher
3. Participate in AO I-CAPS support class
5. Maintain continuous enrollment

Failure to meet the above requirements will result in loss of eligibility of the Black Hawk College Accelerating Opportunity I-CAPS Achievement Award. Once eligibility has been lost, it cannot be reestablished.

Student Signature

Date

Black Hawk College Representative

Date