



## Completion Repayment Assistance Application (Balance Prior to Fall 2021)

Student Name: \_\_\_\_\_

Student ID: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

I request repayment assistance for my prior semester student balance so that I can:

- Re-enroll at NCTC part-time or full time in the \_\_\_\_\_ term.
- Request an official transcript to go to another institution \_\_\_\_\_

Selective Service Statement of Registration Status (select one):

- I was born female and not required to register.
- I was born male and am under the age of 18 and not currently required to register.
- I was born male and am REGISTERED with the Selective Service.
- I was born male and am over the age of 18. I was born male and am not exempt from registration with Selective Service.
- I was born male and am EXEMPT from registration because: (please briefly explain why you are exempt)  
\_\_\_\_\_

Did the COVID-19 pandemic negatively impact you or disrupt your postsecondary education? Please briefly explain.

By providing my name below, this serves as my signature certifying that the above statements are true and correct. I understand that this application does not guarantee approval of funds or amount requested. And, if awarded assistance, I approve that the award amount will be used to pay my prior semester student account balance of tuition and fees. I am willing to participate in any research and information sharing related to this assistance, if needed.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

SEND SIGNED FORM TO ANY ONE OF OUR CAMPUS FINANCIAL AID OFFICES OR EMAIL TO [FINAID@NCTC.EDU](mailto:FINAID@NCTC.EDU).

FOR NCTC OFFICE USE ONLY

BALANCE PRIOR TO FALL 2021? (Y/N) \_\_\_\_\_ BALANCE AMOUNT \_\_\_\_\_ BALANCE PAID? (Y/N) \_\_\_\_\_