



HINDS COMMUNITY COLLEGE

HSE FIRST CLASS FREE AWARD AND SCHOLARSHIP APPLICATION

HSE First Class Free Award:

All HSE recipients are eligible for one free three-semester hour credit class. To qualify, the applicant must meet the following criteria:

1. First-time college student
2. Be 17 years of age or older
3. Be a legal resident of the state of Mississippi

HSE Scholarship:

Students who earn a HSE certificate, and score a minimum of 150 in each subject area with a composite score of 640 or above on the GED®, score a minimum of 15 on each subtest with a composite score of 75 or above on the HiSET®, or score a minimum of 560 in each subject with a composite score of 2800 or above on the TASC, are awarded a tuition scholarship of \$1000. The student must enroll in 15 semester hours of credit and remain enrolled through midterm of the 16-week term. The scholarship covers tuition only AND is renewable for up to 4 semesters if the student maintains a 2.5 GPA. A student may not receive both the ACT Scholarship and HSE Scholarship.

1. First-time college student
2. Be 17 years of age or older
3. Be a legal resident of the state of Mississippi

All applicants must meet general admission requirements for Hinds Community College and complete the Application for HSE First Class Free Award or Scholarship. Scholarships are awarded up to the first day of class.

SCHOLARSHIP APPLICATION

Name _____ Social Security No. _____ / _____ / _____
Last First Middle Initial

Mailing Address _____
Street

Telephone _____ City _____ State _____ Zip _____
Date of Birth _____

Today's Date _____ Application for _____, _____
Semester Year

If you took the HSE under another name than your current name, print that name: _____

Campus (check one)

- | | | |
|--|---|--|
| <input type="checkbox"/> Jackson Campus - Academic/Technical Center | <input type="checkbox"/> Rankin Campus | <input type="checkbox"/> Utica Campus |
| <input type="checkbox"/> Jackson Campus - Nursing/Allied Health Center | <input type="checkbox"/> Raymond Campus | <input type="checkbox"/> Vicksburg-Warren Campus |

**Return completed HSE Scholarship Form and Application for Admission to: District Admissions Office
Hinds Community College
P.O. Box 1100 • Raymond, MS 39154**

I give Hinds Community College permission to request documents necessary to verify the contents of this application. I also understand that falsification of information is a basis for denying admission or for immediate termination of enrollment.

Signature of Applicant _____ Date _____
Unsigned Applications Will Not Be Processed.

The District Admissions Office will send this completed application form to the Financial Aid Office to fill in the following information:

ADMISSIONS OFFICE USE ONLY: Verification of Scholarship	
HSE Composite Score* _____	Registrar _____
<small>Name of HSE Exam</small>	<small>Score</small>
<small>*Please attach a copy of your HSE Transcript if you did not test in Mississippi.</small>	

FINANCIAL AID OFFICE USE ONLY: Verification of Scholarship	
Semester Scholarship Amount _____	Semester (Fall, Spring or Summer), Year _____
Verified By _____	Date _____