



EDUCATION PAYS

A Partnership between Hinds Community College and The Craig H. Neilsen Foundation

Student Agreement

One-time awards of \$500 will be given to eligible individuals who participate in a certified General Education Development (GED) course at a site certified by Hinds Community College, successfully pass all components of the GED test and receive a certificate of high school equivalency from the Mississippi State Board of Community and Junior Colleges. Funding for Education Pays is provided by a grant from The Craig H. Neilsen Foundation to the Hinds Community College Development Foundation.

To be eligible to receive the \$500 award, a student must be a resident of Warren County, Mississippi for at least 90 days before participating in Education Pays. Student must also be 21 or older to participate in award program.

Name _____ Date of Birth _____
 First Middle Last

Phone (home) _____ (cell) _____

Permanent address _____

County & State of Legal Residence _____, _____ Legal Resident since (date) _____

I agree to abide by the following requirements for this program:

1. Attend classes on a regular basis (only 3 absences per term are permitted).
2. Remain an active member in the program until the GED is attained.
3. Take the initial GED Exam within the first two months after registration in the program.
4. Participate in the GED program in the classroom without significant classroom disruption.
5. Provide the original State of Mississippi GED score sheet and GED diploma document to the instructor for verification within two weeks of the document date.

Certification:

All the information provided by me on this form is true to the best of my knowledge. I am at least 21 years old and I have been a legal resident of Warren County for at least 90 days. I understand that by signing this agreement I am not guaranteed an award. I further understand that I must fully comply with all guidelines covered in this agreement if I am to receive the award.

Signature of Student _____ Date _____

Instructor's Signature upon verification of completion _____ Date _____

Comments: _____

For Hinds Community College Development Foundation use:

Date completion verified _____ Date cash award presented _____ Check Number _____

Signature of Foundation Representative _____