

**This form is due on or before September 30, 2009.** Students who return this form after September 30, 2009 may forfeit their scholarship funding.

ROBERT C. BYRD HONORS SCHOLARSHIP (NEW RECIPIENTS)  
NORTH CAROLINA DEPARTMENT OF PUBLIC INSTRUCTION  
2009-2010  
College Enrollment and Financial Aid Certification Form

**AWARDED TO: (PLEASE PRINT)**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Email: \_\_\_\_\_  
Phone : (\_\_\_\_) \_\_\_\_\_

Please return on or before September 30, 2009 to:  
Robert C. Byrd Honors Scholarship Office  
NC Department of Public Instruction  
6330 Mail Service Center                      301 N. Wilmington St.  
Raleigh, NC 27699-6330                      Raleigh, NC 27601

**TAKE THIS FORM TO THE REGISTRAR AND FINANCIAL AID OFFICE AT THE COLLEGE/UNIVERSITY YOU ARE/WILL BE ATTENDING FOR ENROLLMENT AND FINANCIAL AID CERTIFICATION.**

**-CONDITIONS OF THIS AWARD-**

This certification form represents an obligation of the State of North Carolina to pay up to \$1,500.00 upon certification of financial aid status and full-time enrollment in an institution of higher education for the 2009-2010 academic year. Upon receipt of this completed Certification Form and the other BYRD required forms, **one check** for the amount of \$1500.00 will be mailed to the institution for the fall 2009 and spring 2010 semesters. These funds are tax exempt if used for tuition, books, supplies and/or equipment and if the student is a candidate for an undergraduate college degree. **Any forms received after September 30, 2009, may result in the student forfeiting his/her scholarship.**

The "Certification of Eligibility" must be completed and signed by the student. The "State of Registration Status" must be completed and signed by the student and the Registrar. The "College Enrollment and Financial Aid Certification" must be completed by the designated college official. **All information must be completed with original signatures required. PHOTOCOPIES AND FAXED COPIES ARE NOT ACCEPTABLE.**

<p><b>Statement of Registration Status</b></p> <p>____ I certify that I am registered with Selective Service.</p> <p>____ I certify that I am not registered with Selective Service because:</p> <p>    ____ I am female.</p> <p>    ____ I am in the armed services on active duty. (Note: Does not apply to members of the Reserves and National Guard who are not on active duty.)</p> <p>    ____ I have not reached my 18<sup>th</sup> birthday.</p> <p>    ____ I was born before 1960.</p> <p>    ____ I am a permanent resident of the Trust Territory of the Pacific Islands or the Northern Mariana Islands.</p> <p>Social Security # _____</p> <p>Signature: _____</p> <p>Date: _____</p> <p><b>REGISTRAR'S CERTIFICATION</b></p> <p>This is to certify that the above named student is officially enrolled full-time in this institution for the 2009-2010 academic year. <b>Pre-registration is not considered as official enrollment.</b></p> <p>_____ (Signature of Registrar and Date)</p>	<p><b>FINANCIAL AID CERTIFICATION</b></p> <p>This student is eligible to receive \$1500.00 for 2009-2010 without exceeding the Cost of Attendance as established by this institution. The guidelines in Federal Register 654 50B prohibit the award of Robert C. Byrd funding and other <b>Federal</b> financial assistance in amounts that exceed the Cost of Attendance. Additionally, loans should be reduced prior to reducing Robert C. Byrd funds.</p> <p>_____ (Signature of Financial Aid Officer and Date)</p> <p>_____ (Name of College/University)</p> <p>_____ (Address for mailing check)</p> <p>_____ (City, State, Zip Code)</p>
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*Robert C. Byrd Scholarship funding is subject to the availability of Federal Funds.*

Scholarship Processed By: \_\_\_\_\_

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