

Children of Fallen Heroes Scholarship Program Application

Family Information: The following information pertains to the parent or guardian who dieduty while serving as a public safety officer. 1. Last name: First name:
 Relationship of deceased person to student:
 3. Type of public safety officer (select one): An individual serving a public agency in an official capacity, with or without coma: Law enforcement officer Firefighter Chaplain O An employee of the Federal Emergency Management Agency (FEMA) who is official duties of the agency, if those official duties are related to a major disast emergency that has been, or is later declared to exist with respect to the area un Robert T. Stafford Disaster Relief and Emergency Assistance Act; and are determined by the agency of the relation of the properties of the agency of the properties of the properties of the agency of the properties of the pr
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 the applicable agency or entity, is engaging in rescue activity or in the provision of medical services A fire police officer, defined as an individual who is serving in accordance with st law as an officially recognized or designated member of a legally organized public agency and provides scene security or directs traffic in response to any fire drill, f other fire, rescue, or police emergency, or at a planned, special event.



Required Supporting Documentation

- 1. Completed Free Application for Federal Student Aid (FAFSA). The FAFSA may be submitted through fafsa.ed.gov. Guilford College school code is 002931.
- 2. Copy of student's birth certificate. Copies may be obtained from the State Department of Vital Records.
- 3. Copy of death certificate.
- 4. Verification that parent/guardian died in the line of duty while serving as a public safety officer:
 - A determination letter acknowledging eligibility for certain federal benefits under the Public Safety Officers Benefit (PSOB) program administered by the Department of Justice; OR
 - b) A written letter of attestation or determination made by a state or local government official with supervisory or other relevant oversight authority of an individual who died in the line of duty while serving as a public safety officer as defined above; OR
 - c) Documentation of the student qualifying for a state tuition or other state benefit accorded to the children or other family members of a public safety officer consistent with the definition in 42 U.S.C. 3796b, or as a fire police officer as noted above; OR
 - d) A completed Agency Certification Form (page 3) completed by a state or local government official with supervisory or other relevant oversight authority of the individual who died in the line of duty while serving as a public safety officer as defined above; OR
 - e) Other documentation from a credible source, subject to school determination, that describes or reports the circumstances of the death and the occupation of the parent or guardian.
- 5. Additional document required if student is eligible due to death of step-parent: Copy of marriage certificate
- 6. Additional document required if parent or guardian died when student was older than 24: Copy of unofficial transcript or grade report from institution of higher education showing that student was actively enrolled at the time of parent or guardian's death.

To qualify for the scholarship, a student must be:

- 1. Otherwise Pell-eligible
- 2. Have a Pell-eligible EFC higher than \$0
- 3. Be less than 24 years of age OR enrolled at an institution of higher education at the time of his or her parent's or guardian's death

NOTE: <u>Do not</u> send original certificate(s); they <u>cannot</u> be returned. <u>To safeguard your personal information</u>, <u>please do not send sensitive information</u>, <u>including documents with Social Security</u>
Numbers, to us via e-mail.



Children of Fallen Heroes Scholarship Program Agency Certification

This form may be completed by the public safety personnel office to verify parent or guardian's death in the line of duty while serving as a public safety officer. It is not required if alternative documentation is provided.

Please briefly explain how the death of		was classified as a result of	
public safety service:	(name of deceased)		
FOR PUBLIC SAFET	Y PERSONNEL OFFICE USE	EONLY	
I hereby certify that the information prov	aided on this application is co	arrest and contained in our	
I hereby certify that the information pro-	records.	orrect and contained in our	
Print name of authorized official	Name of public safety of	office	
Title	Address Line 1		
Email	Address Line 2		