

Danville Area Community College
Application for Second-Chance Program

Due Dates: Fall – June 15 / Spring – November 15; Turn in to Financial Aid Office

This scholarship program is for those with past-due balances of at least two years at DACC. Acceptance to the program will allow registration for classes in order to complete a certificate or degree. If the ongoing criteria below are met and a certificate or degree is completed while in the program, the original past-due balance will then be forgiven.

Program application requirements: <ul style="list-style-type: none">• DACC past-due balance of at least two years• Good student conduct standing with the college• Not a previous Second-Chance Program participant• Complete the FAFSA• Meet with Financial Aid• Submit personal statement (see below)	Ongoing program requirements: <ul style="list-style-type: none">• Meet financial obligations of current semesters• Maintain a 2.0 term GPA• Complete 1 Career Counseling session prior to first semester registration• Meet with an Academic Advisor to establish an Academic Plan• Complete a degree or certificate within 4 years
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Last Name _____ First Name _____ M.I. _____

Address _____ P.O. Box _____ Telephone (____) _____

City _____ State _____ Zip _____

E-mail _____ Student ID _____

Date of Birth ____ / ____ / ____ Intended major/program _____

Do you intend to transfer to another educational institution after DACC? _____ Yes _____ No

Personal Statement (This must be included for your application to be considered.) Please attach a personal statement including, but not limited to, the following information:

- Major/career aspirations and why you have chosen your particular field
- Resources for support – are you self-supporting? Employed?
- How you will meet current financial obligations if you are accepted into the program
- A description of the circumstances that negatively affected your academic performance or financial situation while at DACC and solutions you have or will implement to overcome those barriers
- Any other relevant information that may be helpful to the Second-Chance Program Committee

I attest that all of the above information is true and correct to the best of my knowledge. I agree to report any factors that may affect my application such as a change in major, change in financial status, etc. I also give the committee permission to review/access my academic records for the purpose of program acceptance. I further understand that failure to provide true and complete information could mean disqualification from the Second-Chance Program.

Applicant's Signature

Date

Please return to Financial Aid by June 15 for Fall or by November 15 for Spring
For questions call the Financial Aid Office at 217-443-8891