

BOSSIER PARISH COMMUNITY COLLEGE

ATHLETIC SCHOLARSHIP AWARD/CONTRACT

_____ has been awarded an athletic scholarship to play _____
Student-Athlete's Name Sport

Scholarship semester: Fall, 20____
 Spring, 20____
 Summer, 20____

Scholarship amount: Tuition
 Mandatory Enrollment, Academic Excellence, Operational, and Technology Fees
 Full book allowance
 \$_____ Stipend X 4 months
 Course Fees

Note: Students who register for classes and who are receiving any type of athletic scholarship must pay in full any charges not covered by the scholarship before the payment deadline as indicated in the *Academic Bulletin* or at the time of registration. Requests for the deferred payment plan will be handled in the Business Office (F-131), and the student will incur a \$20 charge.

The scholarship amount will be applied to tuition and course fees excluding application fee, drop/add fee, clinical fee, technology fee, academic excellence fee, operational fee, and other student-assessed fees. **The student-athlete is responsible for tuition and fees in excess of scholarship amount (see note above). The student-athlete who drops below the required number of hours or fails to fulfill the required obligations as specified by the NJCAA and/or BPCC Athletic Department will be required to make restitution to the College.**

Restitution applies as follows:

- **A student-athlete who has fulfilled his/her responsibilities for less than the mid-term requirement will be required to repay the entire scholarship amount.**
- **A student-athlete who has fulfilled his/her responsibility through mid-term will be required to repay ½ of the scholarship award.**

I have read and fully accept the requirements and responsibilities of this Bossier Parish Community College scholarship. I agree to fulfill these obligations and responsibilities as described by the scholarship criteria and obligations indicated. **I agree to repay expenses owed to the College and return all property of the College before grades or transcripts will be released.** By accepting this scholarship, I authorize an Athletic Department official to verify my GPA and academic standing.

Student-Athlete's Signature

Student ID number

Financial Aid Officer

Assistant Director of Athletics

Individual Awarding Scholarship

Date