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Session: 2091	SOCIAL SECURITY NUMBER
Track Code: AG	<input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/>
	MPC STUDENT'S ID NUMBER

2009—2010 Academic Competitive Grant

You have been identified as a possible Academic Competitive Grant (ACG) recipient.

This federal grant is available to 1st and 2nd year college students who have completed a rigorous secondary school program. (*According to the statute, a rigorous secondary program of study is one that is "...established by a State or local educational agency and recognized as such by the [Secretary of Education]..." The law also provides that "The Secretary shall recognize at least one rigorous secondary school program of study in each State..."*)

Please review the ACG criteria for this program:

- You must be enrolled in 12 units or more
- You must be a U.S. Citizen.
- If you're a first-year student:
 - *You must have graduated high school after January 1, 2009.
 - *You must not have been enrolled in a program of undergraduate education prior to high school graduation.
- If you're a second-year student:
 - *You must have graduated high school after January 1, 2008.
 - *You must have attained at least a Cumulative Grade Point Average (CGPA) of 3.0 in your first-year of undergraduate education.

If you meet the criteria please fill out the top portion of the attached *Rigorous Course of Study Validation Form* and submit it to your high school to complete.

If you do not meet the criteria, please complete the information below and submit to the Student Financial Services Office.

Last Name: _____ First Name: _____

Address: _____
Number/Street City State Zip

Student ID#: _____ Email: _____@_____

Signature: _____ Date: _____

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	SOCIAL SECURITY NUMBER											
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Track Code: AG	MPC STUDENT'S ID NUMBER											

2009—2010 Rigorous Course of Study Validation Form

Last Name	First Name	M.I.	
Number/Street	City	State	Zip
() Home Phone Number	() Cell Phone Number		
Email @	Student ID Number - -		
High School Attended	Date of Graduation		

I hereby authorized the above High School Officials to release information regarding my high school transcript and/or academic records to **Monterey Peninsula College**.

Student Signature	Date
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(TO BE COMPLETED BY HIGH SCHOOL OFFICIAL)

The student identified above may be eligible for an Academic Competitive Grant (ACG) based on this validation. Once the validation is complete please submit to the Monterey Peninsula College Student Financial Services Office.

This student graduated from _____ on _____
Name of High School Date

And completed the following rigorous course of study:

- Completed the California A-G Course Requirements
- Completed State Scholars Requirements
- Golden State Seal Merit Diploma
- AP Exam# _____ Score _____ AP Exam# _____ Score _____
- AP Exam# _____ Score _____ AP Exam# _____ Score _____
- California International Baccalaureate Exam Score: _____
- Complete our-of-state requirements in the state of _____
- Type of rigorous course requirement _____
- Did **NOT** complete a rigorous course of study

High School Seal

Print Name of Principal or Designee	Phone Number	Date
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Signature of Principal or Designee	Email address
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