



**NORTH CAROLINA COMMUNITY COLLEGE SYSTEM**  
*H. Martin Lancaster, President*

February 15, 2007

**MEMORANDUM**

**RESPOND BY: February 25, 2007**

**TO:** Financial Aid Administrators

**FROM:** Monty K. Hickman, Associate Director  
Student Development Services

**SUBJECT: Available Targeted Assistance and Less Than Half Time Funds**

A recent review of fund balances in the Targeted Assistance and Less Than Half Time Funds indicate that there are available funds in each program. The total amount of available funds in the Targeted Assistance Program is \$18,755 and the Less Than Half Time Grant amount is \$13,202. These funds will be reallocated to schools based upon first come, first serve, and on a need basis.

If you wish to be considered for the additional funds from these programs, please complete the attached form and return it to me by February 25, 2007. Completed requests can be sent directly to me by email at [hickmanm@nccommunitycolleges.edu](mailto:hickmanm@nccommunitycolleges.edu) or by fax at (919) 807-7173. I will notify you as quickly as possible regarding the status of your request.

If you have questions, please contact me at (919) 807-7104.

MH/sb  
Attachment

c: Presidents  
Student Development Administrators  
Dr. Delores A. Parker  
Mr. Ken Whitehurst  
Ms. Wanda White

CC07-044  
E-mail

**TARGETED ASSISTANCE AND LESS THAN HALF TIME FUNDS**  
**REQUEST FOR ADDITIONAL FUNDS**

Name of Community College: \_\_\_\_\_

Director of Financial Aid: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Date of Request: \_\_\_\_\_

**Targeted Assistance Funds**

Requested Amount            \$ \_\_\_\_\_

Number of Students            \_\_\_\_\_

**Less Than Half Time Funds**

Requested Amount            \$ \_\_\_\_\_

Number of Students            \_\_\_\_\_

**Please complete this form and fax it to the following:**

Monty K. Hickman  
Associate Director of Financial Aid  
(919) 807-7195 Office  
(919) 807-7173 Fax

**For NC Community College Student Development Services  
Office Use Only**

Amount Approved: \_\_\_\_\_

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

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

Monty K. Hickman, Associate Director  
Student Development Services