



**North Carolina Community Colleges
Short-Term Workforce Development (STWD) Grant
2025-2026 Student Application**

Instructions: Complete this application and return the completed application to BCCC's Continuing Education Department in Building 8, Office 802, or email it to continuingeducation@beaufortccc.edu. For questions, contact the BCCC Continuing Education Registration and Records Office at (252) 940-6375.

Eligibility Criteria:

At a minimum, eligible students applying for this grant must be:

1. A resident of North Carolina, as outlined in [G.S. 116-143.1](#) and following the coordinated and centralized residency determination process administered by the State Education Assistance Authority, known as [NC Residency Determination Service \(RSD\)](#).
2. A Student enrolling in Workforce Continuing Education (WCE) pathways/courses leading to an N.C. Workforce Credential is identified as either Essential or Career Level. These pathways may consist of a single WCE course or a series of courses. The list of eligible credentials is available at <https://nccareers.org/credentials>.

Applicant Information:

Full Name: _____

Home Address: _____ City: _____ State: _____ Zip: _____

E-mail Address: _____ Phone Number: _____

Residency Determination:

Before submitting this application, you must complete residency determination via <https://ncresidency.cfnc.org/residencyInfo/> and be determined to be a resident of North Carolina. Upon completing this step, you will provide a Residency Certification Number ("RCN"), which must be provided below.

Residency Certification Number ("RCN"): _____

Education Program Information:

College Attending/Enrolled: **Beaufort County Community College**

NC Workforce Credential Pursuing: _____

Course(s) in which you plan to enroll or are already registered: - _____

Application Attestation:

I have read and understand the requirements for assistance. I attest that the information provided on this form is complete and correct to the best of my knowledge.

Applicant Signature: _____ Date: _____