



# EMCC Tuition Guarantee Application

MUW Office of Admissions  
1100 College Street MUW-1613  
Columbus, MS 39701-5800

Tel: (662) 329-7106  
Toll free: 877-462-8439  
E-mail: admissions@muw.edu

## PERSONAL INFORMATION

Social Security No. \_\_\_\_\_

Term applying for: \_\_\_\_\_

Full Name: \_\_\_\_\_ Preferred Name: \_\_\_\_\_

Residency Address: \_\_\_\_\_

\_\_\_\_\_ City State Zip

Home Phone (\_\_\_\_) \_\_\_\_\_ Cell Phone (\_\_\_\_) \_\_\_\_\_ Email \_\_\_\_\_

Associate Degree \_\_\_\_\_ Graduated (year) \_\_\_\_\_

### Requirements for Tuition Guarantee

- Earned Associate Degree
- 2.5 GPA on transfer work
- Lowndes County resident
- Must submit FASFA
- Must meet MUW admissions requirements
- Scholarship available for 4 semesters
- Must be enrolled full time at MUW (12 hours)
- EMCC must be the last institution attended

I hereby certify that to the best of my knowledge, all information furnished on this form is complete and accurate. I further understand these courses will be posted to an MUW transcript and grades for these courses will be applied to my permanent academic record. By signing this application, I also understand that this award will be applied to cover only the remainder of tuition after other grants and scholarships are posted on your account. Renewal for tuition guarantee is contingent upon maintaining a 2.5 GPA at MUW.

Student Signature \_\_\_\_\_ Date \_\_\_\_\_