

# Cybersecurity Public Service Scholarship Award 2024-2025 Institutional Verification Form

Maryland Higher Education Commission  
Office of Student Financial Assistance  
6 N. Liberty Street, Ground Suite  
Baltimore, MD 21201  
(410) 767-3300; (800) 974-0203 TTY for the Deaf -  
(800) 735-2258 <http://www.mhec.maryland.gov/>  
Email: [osfamail.mhec@maryland.gov](mailto:osfamail.mhec@maryland.gov)

Submit this form and all required documents to MHEC by **SECURE UPLOAD on-line** through your [MDCAPS account](#). Once logged in, select **“Upload Documents”** from the homepage then follow the prompts.

## **Section A - Student Information**

Social Security Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Date of Birth: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Last name: \_\_\_\_\_ First name: \_\_\_\_\_ MI: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Student Email: \_\_\_\_\_ Telephone #: \_\_\_\_\_

## **Section B - Institution Information** *(All fields below must be completed by the Registrar Office at your current institution.)*

Name of Institution: \_\_\_\_\_

Name of Person at the Institution Completing the Form: \_\_\_\_\_

Email Address: \_\_\_\_\_ Telephone # \_\_\_\_\_

Degree Program: \_\_\_\_\_ Degree Program CIP: \_\_\_\_\_

Degree Level: (Check One) *(Must match the CIP code listed on the MHEC website)*

Certificate  Associate Degree  Bachelor Degree  Graduate Certificate  Master Degree  Doctorate Degree  
(Check One)

Enrollment Status:

Full time  Part-Time

# of credits hours required to complete current degree program: \_\_\_\_\_ # of credit hours completed towards the degree program: \_\_\_\_\_

# of credit hours remaining to complete in the degree program to satisfy graduation requirement: \_\_\_\_\_

Is the applicant within 3 years of graduation if full-time or within 6 years of graduation if part-time from the Degree Program listed above?

(Select One)  Yes  No

What is the applicant's Expected Graduation Date? \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

## **Section C. – Cybercorps Scholarship for Service Award Verification** *(Must be completed by the Registrar Office at the institution)*

Applicants for the Cybersecurity Public Service Scholarship award are eligible for the award, **only** if they never received a Federal Cybercorps Scholarship for Service Award. Verification of whether the applicant has or has not received the award **must** be confirmed by the institution, **check (✓) as applicable below:**

- The applicant has received the Cybercorps Scholarship Award; or  
 The applicant has **not** received or applied for the Cybercorps Scholarship Award

**By signing this form, I acknowledge that all information is accurate and consistent.**

**Signature of Student:** \_\_\_\_\_

**Date:** \_\_\_\_\_

*(Electronic Signature Acceptable; Typed Signature Prohibited.)*

**Signature of Designated Institution Official** \_\_\_\_\_

**Date:** \_\_\_\_\_

*(Electronic Signature Acceptable; Typed Signature Prohibited.)*

*Please return the completed form to the applicant to be submitted with the application documentation. Forms not signed or completed by the Registrar at the institution are INCOMPLETE and not considered for the scholarship.*