



GREENWOOD P R O M I S E

Academic Progress Plan Agreement for Phase 2

THIS SECTION TO BE COMPLETED BY ACADEMIC ADVISOR

I, _____, Academic Advisor at _____
(College or University), have evaluated _____ (student's name)
academic progress plan. I, _____, certify that

(student's name) will have successfully completed 60 credit
hours towards their Bachelor's Degree in _____ (major) by the
start of the Fall 2024 semester and can successfully complete their Bachelors Degree in this major in
TWO Academic Years.

X

Academic Advisor

THIS SECTION TO BE COMPLETED BY STUDENT

I, _____, certify that I have reviewed my academic progress
plan with my advisor and understand I will be required to meet the following requirements below to be
eligible for potential funding for Phase 2 from The Greenwood Promise.

Please initial on each line below beside each statement.

_____ I will have completed 60 credit hours towards a Bachelor's Degree in the major identified
above by Fall 2024.

_____ I will have either the LIFE Scholarship OR Palmetto Fellows Scholarship for the 2024-2025
Academic Year.

_____ I understand I will complete my Bachelors Degree in the major identified in TWO academic years.

_____ I understand I must contact The Greenwood Promise office if I decide to change my major.

_____ I understand that if I decide not to use Phase 2 funding from The Greenwood Promise, I will contact the office immediately in order to allow another student to be chosen.

I understand the requirements that must be met to be considered for Phase 2 funding. By signing below, I certify the information I have provided in the application and on this form is true and accurate. I understand that any false or untrue information will result in a loss of eligibility to receive funding from The Greenwood Promise.

X

_____ Student

X

_____ Parent or Guardian (if minor)

_____ Date