



# STUDENT SCHOLARSHIP APPLICATION FORM

## Instructions:

Please print clearly the following information. Turn in completed application, with all applicable signatures, to VTEC Office. If this form is incomplete, inaccurate, or not signed, it will not be considered.

1. Please complete one application for each scholarship.
2. Complete all other requirements established by the scholarship that you are applying for.

## Personal Information:

Applicant Name: \_\_\_\_\_

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

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

Home Phone/Cell #: \_\_\_\_\_ Currently in Forster Care (Yes/No): \_\_\_\_\_

Student ID# \_\_\_\_\_ E-mail: \_\_\_\_\_

## 3. Education/Financial Need

a) What colleges have you applied to for admission? Please indicate acceptance status.

b) How many years do you plan to attend college, and what course of study would you like to pursue?

c) What future business or educational career will you likely pursue after finishing college?

d) List clubs/organizations, community service, leadership activities you have participated in including volunteer work.

e) List any awards and/or achievements you have received.

f) Describe any special circumstances such as medical conditions, disabilities, etc. that may affect your ability to pay for your college tuition. Use additional pages if necessary.

4. **Student Essay:** *This essay will help us become familiar with you in ways different from courses, grades and test scores. It demonstrates your ability to organize thoughts and express yourself. We are looking for an essay that will help us know you better as a person and as a student. Please describe the factors and challenges that have most influenced you. How are they shaping your future aspirations?*

5. **Certification** I certify that the statements herein are true to the best of my knowledge and grant my permission for the information contained herein to be shared with the scholarship selection committee(s) and scholarship donor(s).

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

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

**VTEC Office Use Only:**

Received By: \_\_\_\_\_ Date: \_\_\_\_\_ Applicant GPA: \_\_\_\_\_

Met all scholarship requirements: \_\_\_\_\_ Application form was complete: \_\_\_\_\_ Application form was incomplete: \_\_\_\_\_

Scholarship Name: \_\_\_\_\_

Scholarship Awarded: \_\_\_\_\_ Date: \_\_\_\_\_